



# THE HEALTH OF BIRKENHEAD

1969

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ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH, and the  
ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER



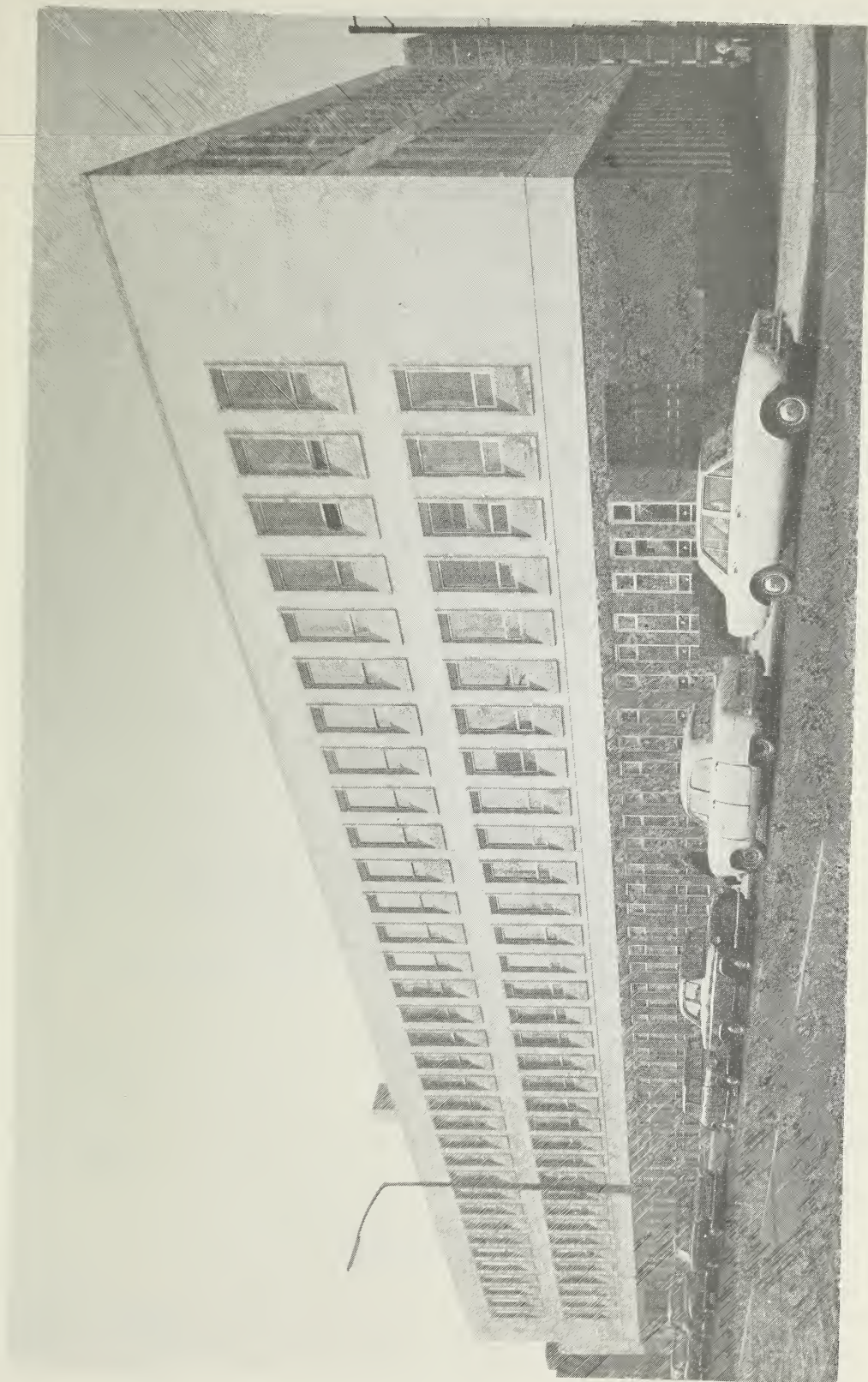
ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH  
AND THE  
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The Social Service Centre, Cleveland Street, Birkenhead.



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COUNTY BOROUGH OF BIRKENHEAD

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HEALTH COMMITTEE

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His Worship The Mayor  
Councillor G. William Gill, J.P.

Chairman:

Councillor Miss D. Tomlinson

Deputy Chairman:

Alderman Mrs. A.L. Crombleholme

Aldermen:

Mrs. E.F. Gardner

Miss B. Jackson

C.S. McDonald

R. Pilkington

J.W. Oates

(Ex-officio, Chairman of Finance Committee)

H. Platt, O.B.E., J.P. (deceased)

(Ex-officio, Chairman of General Purposes Committee)

Councillors:

K.G. Allen

L.N.S. Jones

J. Davies

Mrs. D. Welsh

J.E. Evans

P.A. Wilson

Co-opted Members:

D. Owen

L. Toale

Mrs. E. Banner

J. James

Mrs. E. Ryan

F.S. Dawson

S T A F F

Medical Officer of Health:

P.O. NICHOLAS, M.B., Ch.B., D.C.H., D.P.H.

Deputy Medical Officer of Health:

A.H. WILDE, M.B., Ch.B., D.P.H. (Resigned 28th February, 1969)

Senior Medical Officer:

MARY P. HARAN, M.B., B.Ch., B.A.O., D.P.H.  
(Commenced 18th August, 1969)

School Medical Officer:

PAMELA P. GRIFFITH, L.R.C.P., L.R.C.S., L.R.F.P.S.

Local Medical Practitioners who provide part-time  
services on a sessional basis:

OLIVIA S. CROSTHWAITE, M.B., Ch.B.  
JOYCE M. OWEN, M.B., Ch.B.  
PAMELA A. ROBERTON, M.B., Ch.B., D.Obst., R.C.O.G.  
MAUREEN M. WETHERELL, M.B., Ch.B.  
ISAAC LIPSEGE, M.B., Ch.B.  
WINIFRED M. EVANS, M.R.C.S., L.R.C.P., D.P.H.  
SHIRLEY NICHOLAS, M.B., Ch.B., D.Obst., R.C.O.G.

Chief Dental Officer:

W.M. SHAW, L.D.S.

Superintendent Health Visitor:

Miss A.E. GRIFFITHS, S.R.N., S.C.M., H.V.C.

Non-Medical Supervisor of Midwives and  
Superintendent of Home Nursing Service:

Miss M. PRINGLE, S.R.N., S.C.M., M.T.D., H.V.C.

Chief Public Health Inspector:

M. HOLGATE, M.R.S.H., M.A.P.H.I. (Retired 11th April, 1969)

C.D. DARLEY, F.R.S.H., M.A.P.H.I.

Deputy Chief Public Health Inspector:

F. RUTTER, M.R.S.H., M.A.P.H.I.

Chief Meat Inspector:

T.K. WARD, LL.B.(Lond.), M.R.S.H., M.Inst.M.

Chief Clerk:

S. DUCKWORTH

Senior Mental Welfare Officer:

J. REID

Chief Chiropodist:

G.C.H. BURNS, M.Ch.S., S.R.Ch.

Domestic Help Organiser:

Miss L. DALZIEL



I N T R O D U C T I O N

"Health is a total state of social, mental and physical well-being and not just an absence of disease or infirmity."

This report of the year 1969 is my first as your Medical Officer of Health. Two main features have affected the health of the people of Birkenhead; one was that during this year the fly-overs to take the tunnel traffic from the town traffic were constructed, and the second important change was the completion and the opening of the new Social Services Centre in September of 1969. About these I have written feature articles in this annual report.

During the year, we have developed certain existing services and begun some new services, as the list that follows this introduction shows.

Two Health Centres were planned and by the end of the year those plans were accepted by the Ministry. Similarly, two hostels, a 10-place hostel for mentally sub-normal children was planned for building at Noctorum, and a 25-place hostel for mentally sub-normal adults was planned for the Ford Estate. These projects will be beginning in 1970. A smaller project was the planning of a bathing, cleansing centre at Balls Road Clinic.

During 1969 the new Devon Gardens Day Nursery was opened. This has provided modern facilities for the care of 25 young children.

The care of babies has been our concern in introducing the Guthrie Test for phenylketonuria and the improved system of 'At Risk' testing for all babies born in Birkenhead. The Health Visitors are becoming increasingly adept at recognising slight variations from normal function in the babies, with the possible detection of latent handicaps.

The Midwives have continued their attendances at the Ante-Natal Clinics at St. Catherine's Hospital, and Midwives' Ante-Natal Clinics were opened at the North and South Clinics ensuring a better standard of ante-natal care of those mothers whose babies were delivered on the district. In a town in which 90% of the babies are delivered in hospital, the Midwife on the district has to ensure that she keeps up her midwifery standards while acting so often as a maternity nurse.

District Nursing has made progress in Birkenhead with the introduction of a pilot scheme for sterile dressing service in certain parts of the town. This is obviously a better system than baking dressings in tins. The introduction of the Marie Curie day and night nursing service promises relief and care to patients suffering from terminal cancer.

Screening for cancer of the breast by self-examination continued during the year. The work was organised by the Merseyside Cancer Education Committee in conjunction with the Health Visitors and the Health Education Officer.

Cytological testing for cancer of the cervix seems to arouse little interest on Merseyside. The absence of sufficient pathology technicians made it impossible to conduct a publicity campaign. The truth is that there are many doctors who feel the effectiveness of these screening tests has still to be evaluated.

Re-housing on medical grounds took considerable time during 1969. With the Slum Clearance programme at a standstill for nine months of the year, it is hardly surprising that the health of many people living in bad conditions was subject to strain, particularly was this true of families with several children and with the elderly. I am grateful for the excellent co-operation from the Director of Architecture, Housing and Works and his staff. How they found so much ground floor accommodation for handicapped and the infirm will remain a mystery - certainly we will need increasing provision for the elderly in the future.

The Town Council have agreed to the purchase of two special vehicles for the transport of the handicapped and the elderly. With this specialised transport we can link with Mr. Gamble, the Chief Welfare Officer, and make best use of the welfare facilities at the new Social Services Centre, and perhaps convey to the Villa Marina at Llandudno some elderly who in the past could not reach the Convalescent Home.

We have made progress in the provision of health services to Birkenhead during 1969, in spite of the fact that for several months of the year after Dr. A.H. Wilde, the Deputy Medical Officer of Health, moved to Shropshire, we had only myself and Dr. P.P. Griffith as full-time doctors.

We welcomed Dr. M.P. Haran as Senior Medical Officer in August, 1969, and she has strengthened our team, particularly in the School Health Service.

Were it not for the many part-time doctors who have assisted us during the year, it would not have been possible to run all the clinical services. One in particular, Dr. I. Lipsedge, deserves mention. He had given several years of part-time service to the Birkenhead Health Department - his death at the onset of 1970 was a great loss.

The environment of Birkenhead is as important to the health of the people as the personal health services. In June of 1969, Mr. M. Holgate, the Chief Public Health Inspector, retired after 40 years of excellent service. It was his successor, Mr. C.D. Darley, who arrived in September from Norwich, who supervised the move of the Public Health Inspectors from Hamilton Square to the new offices in Cleveland Street. I am grateful for the energy and enthusiasm that Mr. Darley has poured into the environmental services. In this work he has been joined by Mr. F. Rutter, Deputy Chief Public Health Inspector, Mr. T.K. Ward, Chief Meat Inspector, and the Senior and District Inspectors. The smoke control plan for the town has been altered - the Slum Clearance programme accelerated - and the 'pest' team have determined that the rats and other infestations have been brought under control in the town. If any pests remain, it is certainly not for lack of enthusiasm to be rid of them.

To the administrative and clerical staff of the Health Department, I owe a debt of gratitude. I have benefited by their knowledge over long years of service to Birkenhead. Without their assistance, I could not have survived a rather lonely first year. In return for their loyalty, I have fought for and to some extent achieved a better structuring of the Department.

I thank the Health Committee and, in particular, the Chairman, Councillor Miss D. Tomlinson, whose gentle guidance through the year has been much appreciated. To the Chief Officers and Heads of Corporation Departments, my thanks for their support.

My thanks to the citizens of Birkenhead from whom I have received much encouragement. It is upon these people that the health of our town must surely depend.

P.O. NICHOLAS,

MEDICAL OFFICER OF HEALTH.

HEALTH SERVICES BEGUN AND EXPANDED DURING 1969

Apart from moving to the new Social Services building, which has brought Health, Welfare and Children's Services into closer liaison, the following Health activities were expanded or begun in 1969 :-

- (1) Ante-Natal Services - Re-starting of Midwives' Clinics for improved ante-natal care on the district.
- (2) Continued and improved liaison of Local Authority Midwives with the obstetric services in Hospital Out-Patient Ante-Natal Clinics.
- (3) The first Family Planning Clinic opened in Local Authority premises, namely at North Clinic.
- (4) Care of Babies - The 'Guthrie' Blood Test for the screening of babies for possible phenylketonuria.
- (5) Improved register of congenital malformations in babies.
- (6) Mary Sheridan Testing of all babies to detect 'At Risk' babies. To do this well takes considerable time.
- (7) Specialist Health Visitor trained to supervise spina bifida babies after operation, and in their later care.
- (8) Specialist Health Visitor to supervise Nursery and Child Minders' situation in Birkenhead. This Health Visitor has initiated a course for the training of mothers acting as Play Group Leaders and Child Minders.
- (9) New Day Nursery opened at Devon Gardens, Old Chester Road. A complete review of categories of children attending the Day Nurseries to try and keep the numbers up and give better service.
- (10) Liaison of Health Visitors, District Nurses with General Practitioners has improved.
- (11) Weekly Newsletter to General Practitioners sent through the local Executive Council.
- (12) Two Health Centres - Plans drawn and agreed by Ministry.
- (13) Giving of much improved School Health Services to handicapped children, including plans for improvement of Child Guidance Services.



- (14) Improved testing of partially hearing children - linking with School Health Doctors, Peripatetic Teacher of the Deaf, Education Handicapped Services and Ear, Nose and Throat Surgeon.
- (15) Attempted improved Health Education in Schools, though this is hampered by the lack of Health Visiting personnel. Dr. Fergusson, with 3/5ths time in Birkenhead, can only partially cover this work.
- (16) New Home Help Organiser with a complete review of services.
- (17) The hope of a Specialist Health Visitor to liaise with the Venereal Diseases Specialist to increase the control of this infectious disease.
- (18) District Nursing Services - Planning of Bathing Centre at Balls Road in the hope of improved treatment of scabies and provision for District Nursing Bathing Service.
- (19) One-third of the town now covered by proper Sterile Dressing Service - old method of using dressings cooked in tins in patients' own homes should be abandoned - useless procedure and a waste of District Nurses' time.
- (20) Endeavour to improve District Nursing Service to the elderly, but this is hampered by lack of staff.
- (21) Mental Health Services - One Mental Welfare Officer has now been on the course in Liverpool for 12 months. One woman Mental Welfare Assistant has been appointed. Two Hostels for Juniors and Adults - completed plans drawn - agreed by the Ministry and ready to start. Better liaison with Voluntary Organisations, such as the Wirral Society for the Mentally Handicapped and the Industrial Therapy Organisation. Discussion with a view to linking the I.T.O. with a new Training Centre to be built in Duke Street area.
- (22) Dental Services - Two more full-time Dental Officers appointed and also one Dental Assistant additional to establishment. Car Allowances agreed for Dental Officers to make them more mobile and the service more flexible.
- (23) Public Health Inspection Services - There has been a thorough overhaul of this Department. Rodent Control with proper planning and links with the Port Health Authority. We have competent staff doing this work and the pests may soon be brought under control. There is still a long way to go. Many dirty house situations have been cleared, including a survey of Common Lodging Houses. Complete survey of housing needs. Slum Clearance Programme has been re-organised and the clearance started again after the cessation due to the building of the

fly-over roads. Housing improvement and area improvement are under consideration. Public Health assessment of new building schemes is now accepted. Change of Smoke Control programme. We are trying to increase the areas covered by Smoke Control Orders. Increased work by District Inspectors and Food Inspectors to improve food hygiene. Endeavour made to get a better link with the work of the Chief Meat Inspector. £80,000 to be spent on Tranmere Abattoir - should increase the meat inspection in Birkenhead. Complete survey of toilet facilities is under way. In the office work in the Public Health Inspection Section there has been a complete review of large sections of Public Health Law to be used in nuisance control, etc.

- (24) Re-housing on medical grounds has been re-organised.
- (25) Improved Chiropody Services during 1969 - we reduced some of the expensive domiciliary treatment and converted this into surgery treatment wherever this was possible.
- (26) Purpose-built transport shortly available. Will assist services to the elderly.

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#### THE SOCIAL SERVICES CENTRE AT BIRKENHEAD

The Social Services Centre was opened by The Rt. Hon. The Lord Cohen of Birkenhead on 24th September, 1969. Lord Cohen, in his opening address, made a strong plea for improved preventive services to maintain the health of the community. He emphasised the importance of Health Education and he quoted John Morley, "Education is not simply knowing more but behaving differently".

It is to be devoutly hoped that this impressive centre will be instrumental in helping us all to changed attitudes in the maintenance of real health in Birkenhead.

A few days after the building was officially opened, we moved all the various sections into the new centre and, in doing so, we turned over some history from photographs of the early Public Health Inspector of Birkenhead in top hat and morning coat to a set of quill pens. This was a glorious opportunity to look through the old files and learn some of the history of the health of Birkenhead.

As I read the files I soon became aware of the struggles of my predecessor, Dr. J.W. Lobban, to achieve improved buildings for the health and social services. The memoranda on the files go back for many years and represent many abortive plans and schemes to bring all the services together.

At one stage, for several years, the Health, Welfare and Children's Departments were all under the general control of the Medical Officer of Health, and were partly housed at 9 Hamilton Square. Indeed, this was the situation when the Social Services Centre to be built on the Cleveland Street site was planned. Even while that plan was becoming reality, the Welfare and Children's services came under separate chief officers. This division occurred in 1966 and thus, by the time the new Social Services Centre was built, it was to house three separate departments under a Medical Officer of Health, a Chief Welfare Officer and a Children's Officer.

The Social Services Centre was planned and built by Mears Bros. under the direction of the Director of Architecture. The Centre cost half a million pounds, and from the photograph it can be seen what an impressive building it is.

The plan of the health section of the building is outlined in the diagram. The plan is not perfect; how could it be in the rapidly changing pattern of social services? However, the Social Services building represents a great advance in the life of Birkenhead. This is the first time the people of the town have had an opportunity to have all sections of the Department together in a building which is suitable to provide adequate services. If people have a health or social problem, they have only one building to visit now. There have been criticisms that so much money was spent on a Social Services Centre, but Birkenhead has more than its share of health and social problems, and this centre gives an image to preventive health and care which the town has never had before.

Of course, the building alone is poor indeed, unless the teams of health and social workers who serve within it work together for the good of the people of the town. The co-operation that has been shown between the staff of the three Departments has been impressive, and the increasing numbers of people attending the Social Services Centre demonstrates that we are providing a wider service even in the first three months of operation of the Centre.

The future has many excitements. In the coming year there will be the passing of the Social Services Bill in which the Welfare and Children's Departments and certain sections of the present Health Department, namely Home Help, Mental Welfare Section and the Day Nurseries will come under the control of a Director of Social Services. This will inevitably mean re-organisation of some of the available rooms within the building but, if possible, we must maintain the Health and Social Services together for be it personal health, or environmental health, these are inseparable from social after-care services.

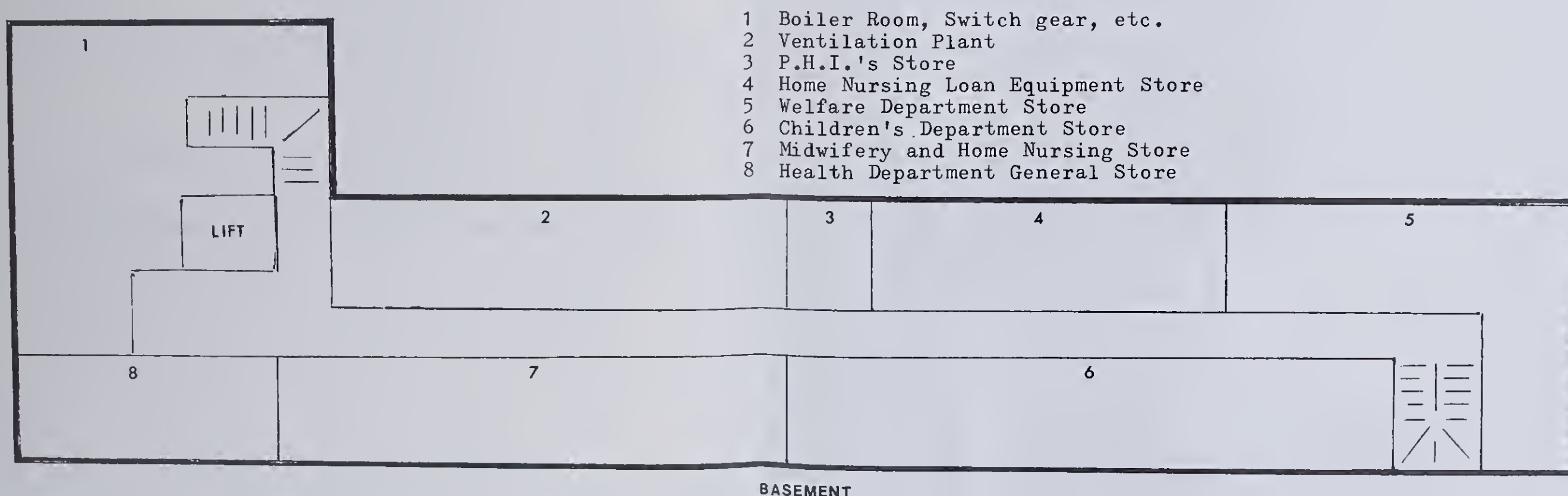
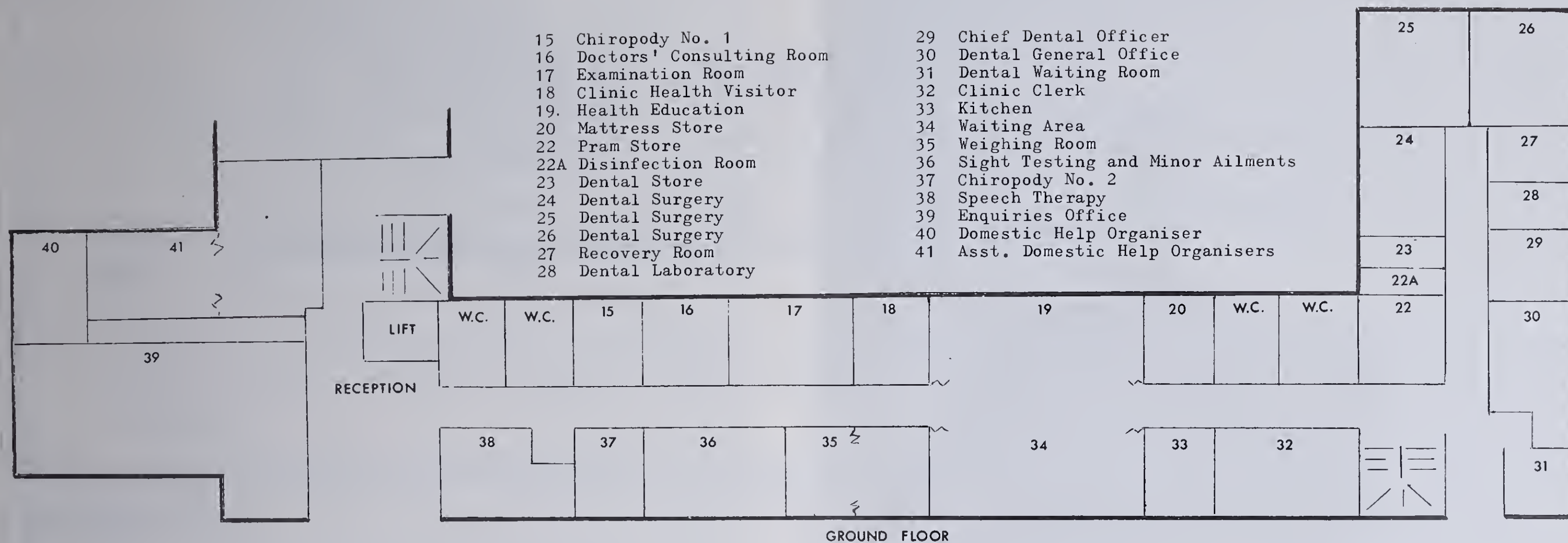
The Green Paper suggests the removal of health services from the Local Authority to some larger area board. The Local Authorities under the Maud proposals are also to increase in size. It is to be hoped that they do not become so large that they become too impersonal for the people for whom the Social Services Centre was built.

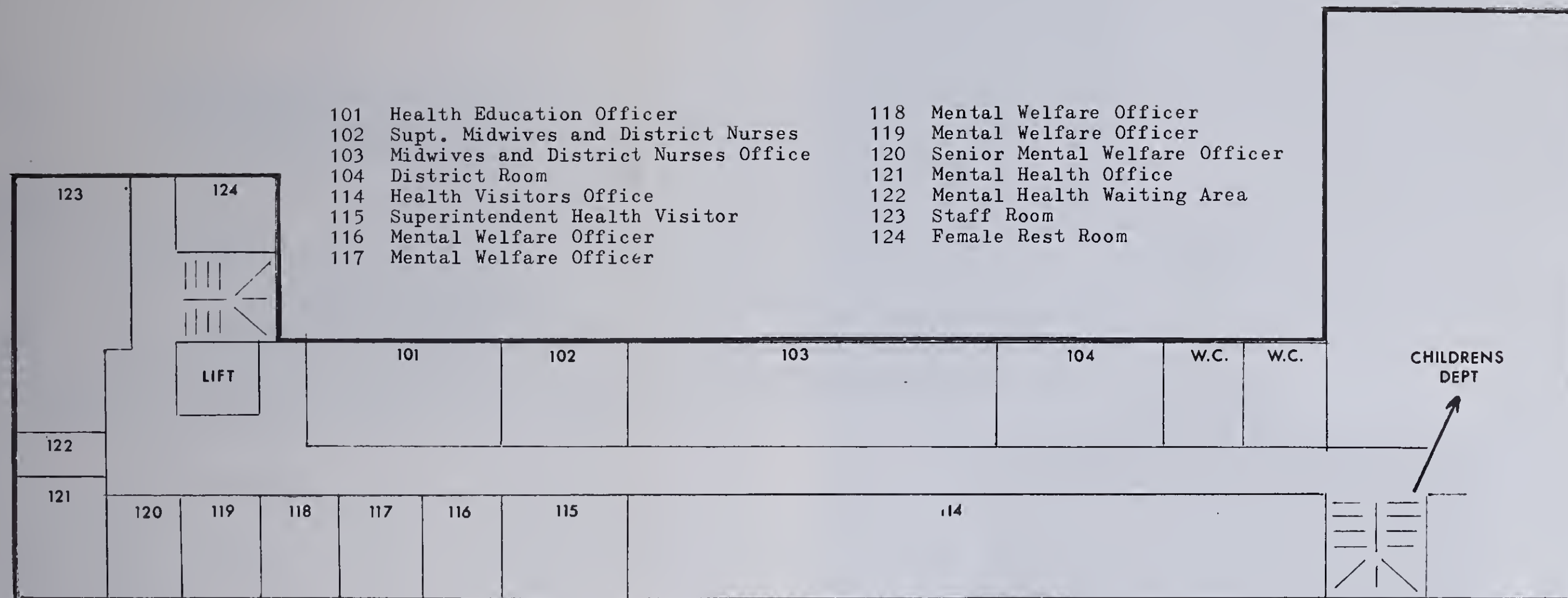
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H E A L T H   D E P A R T M E N T



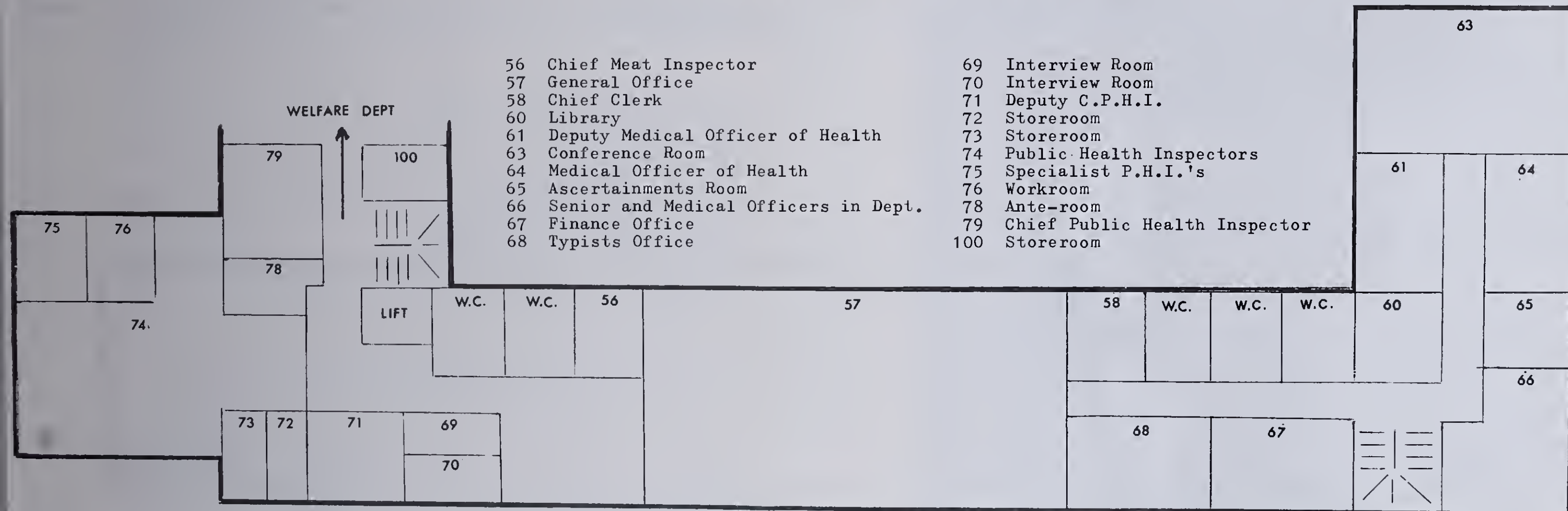




101 Health Education Officer  
 102 Supt. Midwives and District Nurses  
 103 Midwives and District Nurses Office  
 104 District Room  
 114 Health Visitors Office  
 115 Superintendent Health Visitor  
 116 Mental Welfare Officer  
 117 Mental Welfare Officer

118 Mental Welfare Officer  
 119 Mental Welfare Officer  
 120 Senior Mental Welfare Officer  
 121 Mental Health Office  
 122 Mental Health Waiting Area  
 123 Staff Room  
 124 Female Rest Room

SECOND FLOOR



56 Chief Meat Inspector  
 57 General Office  
 58 Chief Clerk  
 60 Library  
 61 Deputy Medical Officer of Health  
 63 Conference Room  
 64 Medical Officer of Health  
 65 Ascertainments Room  
 66 Senior and Medical Officers in Dept.  
 67 Finance Office  
 68 Typists Office

69 Interview Room  
 70 Interview Room  
 71 Deputy C.P.H.I.  
 72 Storeroom  
 73 Storeroom  
 74 Public Health Inspectors  
 75 Specialist P.H.I.'s  
 76 Workroom  
 78 Ante-room  
 79 Chief Public Health Inspector  
 100 Storeroom

FIRST FLOOR

SUMMARY OF STATISTICS 1969COUNTY BOROUGH OF BIRKENHEAD

Area of Borough (in acres)	..	..	..	..	..	..	8,643
Population (Census 1961) ..	..	..	..	..	..	..	141,683
" (Estimated Civilian Population 1969)	..	..	..	..	..	..	141,950
New Permanent Houses, including flats, certified	..	..	..	..	..	..	499
Existing Buildings altered to provide dwelling accommodation	..	..	..	..	..	..	9
Estimated Number of Houses in the Borough	..	..	..	..	..	..	44,196
Rateable Value at 1st April, 1969	..	..	..	..	..	..	£5,108,521
General Rate 1969/70:	..	..	..	..	..	..	13/8d.
Domestic properties	..	..	..	..	..	..	12/5d.
Mixed properties	..	..	..	..	..	..	13/1d.
Estimated product of a penny rate	..	..	..	..	..	..	£20,300
Live Births	..	..	..	..	..	..	2,488
Live Birth Rate per 1,000 Population (Corrected)	..	..	..	..	..	..	17.3
Stillbirths	..	..	..	..	..	..	45
Stillbirth Rate per 1,000 live and stillbirths	..	..	..	..	..	..	18
Total live and stillbirths	..	..	..	..	..	..	2,533
Infant Deaths	..	..	..	..	..	..	69
Infant mortality rate per 1,000 live births - total	..	..	..	..	..	..	28
Infant mortality rate per 1,000 live births - legitimate	..	..	..	..	..	..	27
Infant mortality rate per 1,000 live births - illegitimate	..	..	..	..	..	..	33
Neo-Natal mortality rate per 1,000 live births	..	..	..	..	..	..	20
Early Neo-Natal mortality rate (under one week)	..	..	..	..	..	..	17
Post Neo-Natal mortality rate (over four weeks and under one year)	..	..	..	..	..	..	8
Illegitimate live births per cent of total live births	..	..	..	..	..	..	11
Maternal deaths (including abortion)	..	..	..	..	..	..	-

Maternal mortality rate per 1,000 live and stillbirths	..	..	..	..	..	..	..	..	-
Perinatal mortality per 1,000 total births (live and still)	..	..	..	..	..	..	..	..	34
Deaths	..	..	..	..	..	..	..	..	1,764
*Death Rate (Corrected)	..	..	..	..	..	..	..	..	13.8
*Death Rate from heart disease	..	..	..	..	..	..	..	..	4.057
*Death Rate from cancer (Lung)	..	..	..	..	..	..	..	..	0.66
*Death Rate from cancer (Other Sites)	..	..	..	..	..	..	..	..	1.8
*Death Rate from diseases of the respiratory system	..	..	..	..	..	..	..	..	14.6
*Pulmonary Tuberculosis Death Rate	..	..	..	..	..	..	..	..	.074

#### ENGLAND AND WALES

*Birth Rate	..	..	..	..	..	..	..	..	16.3
Stillbirth Rate (per 1,000 total births)	..	..	..	..	..	..	..	..	13
*Death Rate	..	..	..	..	..	..	..	..	11.9
Infant Mortality (Deaths under one year per 1,000 live births)	..	..	..	..	..	..	..	..	18

\*Per 1,000 of Population

#### VITAL STATISTICS

##### BIRTHS

There were 2,488 births in Birkenhead in 1969, 1,225 females and 1,263 males. The live birth rate (corrected) per 1,000 of the population was 17.3.

As can be seen from the tables, the numbers of live births has fallen over the past five years and so has the rate per 1,000 of the population, even though the total population of the town has shown a slow fall in the same five year period.

<u>Year</u>	<u>Registrar's General's Estimate of Population</u>	<u>Live Births</u>	<u>Deaths</u>	<u>Excess of Births over Deaths</u>	<u>Live Births Rate per 1,000 Population</u>
1965	143,660	2,810	1,668	1,142	19.3
1966	143,580	2,718	1,633	1,085	18.7
1967	143,550	2,562	1,672	890	17.6
1968	142,480	2,499	1,711	788	17.3
1969	141,950	2,488	1,764	724	17.3



BIRTHS WHICH OCCURRED IN THE BOROUGH

	<u>Live</u>	<u>Still</u>	<u>Total</u>
<u>In Institutions</u>			
Birkenhead Maternity Hospital	854	10	864
Birkenhead General Hospital	1	-	1
St. Catherine's Hospital	1,518	47	1,565
<u>Born at Home</u>	158	2	160
<u>Total Births occurring in the Borough</u>	2,531	59	2,590

As will be seen from the figures, only about 6% of births occurred at home.

There were 182 premature live births.

DEATHS

1,764 deaths occurred during the year (909 males and 855 females). This represents a death rate of 13.8 per 1,000 population. The comparable death rate for England and Wales is 11.9 per 1,000 population.

Recent annual figures are as follows :-

<u>Year</u>	<u>Borough</u>	<u>England and Wales</u>
1956	12.8	11.7
1957	12.7	11.5
1958	13.3	11.7
1959	12.9	11.6
1960	12.9	11.5
1961	14.0	12.0
1962	13.5	11.9
1963	13.8	12.2
1964	12.5	11.3
1965	12.8	11.5
1966	12.5	11.7
1967	12.8	11.2
1968	13.3	11.9
1969	13.8	11.9

Though we continue to have an excess of births over deaths, some 724 in 1969, the estimated population of Birkenhead continues the slow fall of recent years. In addition to our higher death rate, it is reasonable to assume that families with children are leaving the Borough. Presumably, some of the younger workers are seeking employment elsewhere. The obvious cause for the decline in the population is that people are moving out of the industrial town to re-housing in the county areas of Wirral.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING 1969  
(as compiled by the Registrar General)

CAUSE OF DEATH	Sex	All Ages	Under 4 weeks	4 weeks & under 1 year	AGE IN YEARS							65-74	75 & over
					1-4	5-14	15-24	25-34	35-44	45-54	55-64		
Enteritis and Other Diarrhoeal Diseases	M	-	-	-	-	-	-	-	-	-	-	-	-
Tuberculosis of Respiratory System	F	1	-	1	-	-	-	-	-	-	-	-	-
Other Tuberculosis, incl. Late Effects	M	8	-	-	-	-	-	-	-	-	-	3	-
Malignant Neoplasm - Buccal Cavity etc.	F	3	-	-	-	-	1	-	-	-	-	1	-
Malignant Neoplasm - Oesophagus	M	2	-	-	-	-	-	-	-	-	-	-	-
Malignant Neoplasm - Stomach	F	1	-	-	-	-	-	-	-	-	-	-	-
Malignant Neoplasm - Intestine	M	4	-	-	-	-	-	-	-	-	-	-	-
Malignant Neoplasm - Larynx	F	6	-	-	-	-	-	-	-	-	-	-	-
Malignant Neoplasm - Lung, Bronchus	M	24	-	-	-	-	-	-	-	-	-	-	-
Malignant Neoplasm - Breast	F	23	-	-	-	-	-	-	-	-	-	-	-
Malignant Neoplasm - Uterus	M	17	-	-	-	-	-	-	-	-	-	-	-
Malignant Neoplasm - Prostate	F	25	-	-	-	-	-	-	-	-	-	-	-
Leukaemia	M	1	-	-	-	-	-	-	-	-	-	-	-
Other Malignant Neoplasms	F	-	-	-	-	-	-	-	-	-	-	-	-
Benign and Unspecified Neoplasms	M	79	-	-	-	-	-	-	-	-	-	-	-
Diabetes Mellitus	F	15	-	-	-	-	-	-	-	-	-	-	-
		32	-	-	-	-	-	-	-	-	-	-	-
		10	-	-	-	-	-	-	-	-	-	-	-
		12	-	-	-	-	-	-	-	-	-	-	-
		3	-	-	-	-	-	-	-	-	-	-	-
		5	-	-	-	-	-	-	-	-	-	-	-
		41	-	-	-	-	-	-	-	-	-	-	-
		49	-	-	-	-	-	-	-	-	-	-	-
		1	-	-	-	-	-	-	-	-	-	-	-
		1	-	-	-	-	-	-	-	-	-	-	-
		1	-	-	-	-	-	-	-	-	-	-	-
		7	-	-	-	-	-	-	-	-	-	-	-



CAUSE OF DEATH	Sex	All Ages	Under 4 weeks	4 weeks & under 1 year	AGE IN YEARS							65-74	75 & over
					1-4	5-14	15-24	25-34	35-44	45-54	55-64		
Cirrhosis of Liver	M	5	-	-	-	-	-	-	-	-	3	1	1
Other Diseases of Digestive System	F	3	-	-	-	-	-	-	1	-	-	1	1
Nephritis and Nephrosis	M	8	-	-	-	1	-	-	-	1	3	1	2
Hyperplasia of Prostate	M	10	-	-	-	-	-	1	-	-	5	-	5
Other Diseases, Genito-Urinary System	M	3	-	-	-	-	-	-	-	-	1	1	-
Diseases of Skin, Subcutaneous Tissue	F	6	-	-	-	-	-	-	-	-	1	-	2
Diseases of Musculo-Skeletal System	M	12	-	-	-	-	-	-	-	2	-	-	-
Congenital Anomalies	F	1	2	-	-	-	-	-	-	2	4	-	4
Birth Injury, Difficult Labour etc.	M	12	6	-	-	-	-	-	-	-	1	-	2
Other Causes of Perinatal Mortality	F	5	1	3	2	1	-	-	-	-	-	-	-
Symptoms and Ill-Defined Conditions	M	12	12	-	-	-	-	-	-	-	-	-	-
Motor Vehicle Accidents	F	10	10	-	-	-	-	-	-	-	-	-	-
All Other Accidents	M	9	9	-	-	-	-	-	-	-	-	-	-
Suicide and Self-Inflicted Injuries	F	4	4	-	-	-	-	-	-	-	-	-	-
All Other External Causes	M	5	-	-	-	-	-	-	-	-	-	-	-
	F	6	-	-	-	-	-	-	-	-	-	-	-
	M	17	-	-	-	2	6	1	1	1	3	1	1
	F	6	-	-	-	2	-	1	-	1	-	-	-
	M	12	-	4	-	-	-	-	-	2	1	-	-
	F	11	-	1	-	-	-	-	-	1	3	-	3
	M	10	-	-	-	-	1	2	-	3	2	1	-
	F	5	-	-	-	-	-	-	-	1	1	-	2
	M	3	-	-	-	-	-	-	-	-	-	-	-
	F	4	-	-	-	-	1	-	1	-	-	1	1
TOTAL ALL CAUSES	M	909	29	12	5	5	13	9	21	84	193	273	265
	F	855	20	8	6	3	3	5	19	44	118	210	419

DEATHS FROM PUERPERAL CAUSES

There were no deaths from puerperal causes in 1969.

INFANT MORTALITY

There were 69 deaths of infants under one year, an infant mortality rate of 28 per 1,000 live births. The infant mortality rate for 1,000 legitimate live births was 27 and illegitimate 33. The infant mortality rate for England and Wales was 18. The primary causes of death are shown in the following table :-

INFANT DEATHS

CAUSE OF DEATH	AGE AT DEATH									
	0-7 Days	8-14 Days	15-21 Days	22-28 Days	Total under 4 Wks	1-3 Mths	3-6 Mths	6-9 Mths	9-12 Mths	Total Each Cause
Prematurity	22	-	-	-	22	-	-	-	-	22
Congenital Malformations	3	2	1	1	7	3	2	-	-	12
Pneumonia	-	-	1	2	3	7	1	-	-	11
Birth Injuries	8	-	-	1	9	-	-	-	-	9
Other Causes	6	1	1	-	8	2	4	1	-	15
Total Deaths in Each Age Group	39	3	3	4	49	12	7	1	-	69

These figures show a decrease compared with the previous year of 1 accidental death and 7 deaths from pneumonia.

SUMMARY OF COMPARATIVE STATISTICS

	<u>Birkenhead</u>	<u>England and Wales</u>
Birth Rate (per 1,000 population)	17.3	16.3
Stillbirth Rate (per 1,000 total live and still births)	18	13
Death Rate (per 1,000 population)	13.8	11.9
Infant Mortality Rate (per 1,000 live births)	28	18
Neo-Natal Mortality Rate (Deaths under 4 weeks per 1,000 live births)	20	12
Early Neo-Natal Mortality Rate (Deaths under 1 week per 1,000 live births)	17	10
Perinatal Mortality Rate (Stillbirths and deaths under 1 week per 1,000 total births live and still)	34	23



PERINATAL MORTALITY RATE

The perinatal mortality rate is the number of stillbirths added to the number of infant deaths during the first week of life expressed as a rate per thousand total births live and still. In 1969 the perinatal mortality rate for Birkenhead was 34. All the figures stillbirth rate, neo-natal rate, infant mortality rate and the perinatal mortality rate are higher than the figures for England and Wales.

	<u>1965</u>	<u>1966</u>	<u>1967</u>	<u>1968</u>	<u>1969</u>
Infant Mortality Rate	25.2	23.9	24	26	28
Neo-Natal Mortality Rate	17.1	16.9	18.3	16.5	20
Stillbirth Rate	18.8	16.6	16.5	16.9	18
Perinatal Mortality Rate	32.8	31.1	33.7	29.6	34

GENERAL DISCUSSION - (INFANT MORTALITY - STILLBIRTHS ETC.)

We still have some way to go to achieve the lower infant and neo-natal mortality figures of southern areas of England. Our best hope is to accelerate our housing clearance and improve our twilight housing and continue to clean up the industrial atmosphere. The Birkenhead baby is entitled to clean air. It is fortunate that most babies are delivered in hospital, but some mothers return with their babies to damp, cold and sometimes over-crowded housing conditions - this is a particular problem for babies born in the winter months.

There were three deaths from pneumonia in the neo-natal period and 8 deaths from pneumonia in babies aged between 1 month and 6 months, some 11 deaths in all. This is a lower total than the 18 deaths from pneumonia in 1968.

Birkenhead can take pride in the new housing estates built in recent years - this warm housing offers the best chance of health to small babies.

We will not eliminate all deaths in babies, some of the small prematures and some with congenital malformations will die, but we must prevent such loss of life that can be avoided.

It is quite impressive from the following table how many of the small premature babies survived, though all that were under 2 lbs. 3 ozs. died in up to seven days. 8 of the 13 premature babies between 2 lbs. 3 ozs. and 3 lbs. 4 ozs. survived. It must have taken much patient nursing to rear these small babies.

1 9 6 9P R E M A T U R E   I N F A N T S

Weight at Birth	Total Prematures Born Alive	Prematures Dying			Total Still Births
		Within 24 hrs.	In One and Under 7 Days	7-28 Days	
2lbs 3oz or less	5	4	1	-	3
Over 2lbs 3oz up to and including 3lbs 4oz	13	3	2	-	8
Over 3lbs 4oz up to and including 4lbs 6oz	25	2	5	-	8
Over 4lbs 6oz up to and including 4lbs 15oz	47	-	5	-	1
Over 4lbs 15oz up to and including 5lbs 8oz	92	2	4	-	4
Total	182	11	17	-	24



DEATHS DUE TO CANCER OF THE LUNG

The number of deaths was 94 compared with 115 in 1968. The marked disproportion between males and females has continued - 79 males and 15 females have died from this condition.

Recent figures are as follows :-

<u>Year</u>	<u>Males</u>	<u>Females</u>	<u>Total</u>
1956	48	8	56
1957	53	7	60
1958	79	11	90
1959	58	17	75
1960	64	19	83
1961	59	8	67
1962	68	8	76
1963	89	15	104
1964	92	9	101
1965	70	14	84
1966	70	13	83
1967	84	16	100
1968	92	23	115
1969	79	15	94

The local figures represent 0.66 per 1,000 population. The national rate is 0.61.

With smoke control, an effort is being made to reduce the atmospheric pollution in Birkenhead, but the figures for lung cancer remain high in this town, as they do in other industrial conurbations.

Those who smoke cigarettes would be advised to stop, or change to pipe or cigar smoking, and young people who are already experimenting with cigarettes, or some who have already got into the habit of smoking, would be well advised to take note of the high figures for lung cancer and rid themselves of this dangerous habit.

CANCER OF OTHER SITES

256 deaths occurred as a result of cancer of other sites, representing 1.8 per 1,000 population. The national rate is 1.74.

Malignant Neoplasm - Buccal Cavity etc.	3
" " - Oesophagus	10
" " - Stomach	47
" " - Intestine	42
" " - Larynx	1
" " - Breast	33
" " - Uterus	10
" " - Prostate	12
Leukaemia	8
Other Malignant Neoplasms	90
	<hr/>
	256
	<hr/>

ACCIDENTSROAD ACCIDENTS

23 deaths occurred as a result of road accidents. This is the figure taken from the Ministry Statistics and represents the number of Birkenhead residents who died from this cause; their deaths did not necessarily occur within the County Borough boundary.

I am indebted to the Chief Superintendent of Police in Birkenhead for the following report :-

"ACCIDENT CAUSATION AND PREVENTIVE MEASURES

The main causes of accidents during 1969, both in the County of Cheshire and Nationally, were :-

- (1) Drivers turning right without due care.
- (2) Drivers crossing without due care at road junctions, particularly side roads.
- (3) Drivers using excessive speed having regard to prevailing conditions.
- (4) Drivers being inattentive or having their attention diverted.
- (5) Pedestrians crossing the road heedless of traffic.

These five categories were responsible for 50% of all accidents which occurred in 1969. Obviously, since human error is the prime factor in all these different causes, our main preventive measure takes the form of propaganda, directed at the road user in all his guises.

The situation which pertains in Birkenhead differs very little from that in the rest of the County, or the rest of the country, and there is no doubt that our hospitals would have many fewer patients if it were not for the toll of road accidents.

Dealing with other points which arise, there are many occasions when traffic management measures can be taken in an effort to cut down accidents. These range from simple items, such as removing foliage which obscures a traffic sign from the vision of approaching drivers, to complicated schemes involving possible re-alignment of roads and installation of traffic signals. Our part in these matters consists in reporting and making suggestions to the Borough Engineer and Surveyor who is the acknowledged expert in traffic engineering matters. There exists between our two Departments a very close liaison in this field.

The statistics of road accidents for the year 1969 are as follows :-

1. Number of injury accidents - 663 (Includes 20 fatal, one of which resulted in two deaths).
2. Number of persons injured - 826 (109 serious)  
(717 slight)
3. Number of deaths - 21 (these occurred within the Borough boundary).
4. Number injured in daylight - 462
5. Number injured in darkness - 201
6. Age of deceased - of the 21 fatalities :-;
 

3 pedestrians under 15 years	
9 pedestrians over 15 years	
4 car or vehicle drivers )	
2 motor cyclists )	Age not available
3 vehicle passengers )	

Of the total accidents (663), 645 were in a built-up area with speed limit of 30 m.p.h. and 18 were in areas outside this speed limit."

#### ACCIDENTS IN THE HOME

23 deaths occurred as a result of other accidents - most of these were accidents in the home - 5 of these in children under the age of 1 year. These deaths in infancy and early childhood must be considered with the rising incidence of poisoning cases treated at the Birkenhead Children's Hospital during the year.

	<u>1969</u>	<u>1968</u>
<u>Total Number of Poisoning Cases Treated:</u>	<u>316</u>	<u>240</u>

#### Age Incidence:

Birth to 1 year	10	9
1 year to 2 years	95	56
2 years to 3 years	123	88
3 " to 4 "	55	48
4 " to 5 "	16	18
5 " to 8 "	14	15
8 " to 11 "	-	2
Over 11 years	<u>3</u>	<u>4</u>

#### Nature of Poisoning:

Drugs or Medicines	183	144
Domestic Items	<u>133</u>	<u>96</u>

1969                      1968

Nature of Poisoning:

Drugs:

Aspirin	61	58
Tranquillisers	33	27
Other types of tablets	54	25
Others	35	34

Domestic Items:

Bleach and Disinfectants	26	16
Paraffin and Turpentine	23	16
Polishes	9	5
Cosmetics	19	4
Mice, Rat and Fly Poisons	5	4
Toadstools and Berries	13	16
Other Domestic Substances	38	35

Means by which Poisons were obtained:

Left lying loose in house, i.e. tables, drawers, mantelpiece, shelves, cupboards, etc.	226	173
Obtained from handbags	28	15
Obtained from other persons	10	7
Found in gardens, streets and old properties	18	20
Details not known	34	25

Once again, the total figure for 1969 - 316 - is higher than any other year since the first Annual Report was submitted for 1963. The total figures for the intervening years are as follows :-

1968 - 240	1965 - 150
1967 - 186	1964 - 175
1966 - 156	1963 - 138

Of the total figure of 316 for 1969, 212 were admitted to the hospital wards, 18 were transferred to other hospitals after being seen in the Casualty Department, through shortage of accommodation at the Children's Hospital at the time in question, and 86 were treated and allowed to go home.

As will be seen from a later report on Health Education, a great effort has been made to persuade parents of the need for increased care in respect of tablets and other noxious materials which tend to be collected in the average household.

From a consideration of what these young people ate, it is obvious that distasteful substances or foul smells do not put a young child off these poisons. Destruction of unwanted tablets

and the proper locking away of poisons and instruction to children as soon as they are able to understand the risks is essential if we are to reduce this hazard.

By the end of 1969 we were considering the possibility of the use of safety containers for dangerous tablets, but there are many snags in introducing such a system as the next Annual Report will show.

### SUICIDE

15 cases of suicide occurred during the year. The table for preceding years is shown below :-

1965	-	14
1966	-	9
1967	-	10
1968	-	12
1969	-	15

### HEART DISEASE

Heart disease accounted for 576 deaths (an increase of 50 over the previous year). This represents 4.057 per 1,000 population.

### PNEUMONIA AND BRONCHITIS

Pneumonia claimed 119 victims, while bronchitis was the cause of death in 140 cases. Together these diseases represented 14.6% of total deaths. 105 of the deaths due to these diseases occurred in the age group 75 years and over. There were 7 deaths from influenza.

### DEATHS DUE TO TUBERCULOSIS

		<u>Rates per</u> <u>1,000 Population</u>
Respiratory	11	0.07
Non-Respiratory	3	0.02



## HEALTH CENTRES

WHETSTONE LANE HEALTH CENTRE:- The final planning of this centre to accommodate three or four family doctors took place during 1969. The idea of this centre had been thought out for some time before to serve doctors who were in group practice and at the same time to attach health visitors and give district nursing help. The centre will be a focus of health in an area where health education facilities have been limited up to the present time. This Health Centre will cost about £25,000.

THE FORD HEALTH CENTRE:- This is a more ambitious project giving full facilities for four doctors or more, some who are in single-handed and others in group practice. A full range of local authority services will also be provided from the health centre, including dental services on the second floor of the building.

In the original capital building programme, there had been intention to build Health Centres in the middle of the new Noctorum and Ford Estates and also to provide a possible Health Centre or local authority clinic at Upton.

In the detailed discussions with the Executive Council and the family doctors it was found that there was insufficient support for the building of these centres in the middle of the Noctorum and Ford Housing Estates. The family doctors preferred the idea of a single health centre near the main omnibus route in the Ford road. The trouble was that most of the sites near the main Ford road were bespoke for other purposes and the only available site was on land adjacent to the entrance road to the Ford Estate. This is on a bend in the road, but just opposite a Corporation house in which two family doctors, in separate practices, are giving full services, and these doctors are building up a list of patients of those being re-housed in the new estates from clearance of old houses in the down town areas. Both these doctors wish to practice from the proposed new Ford Health Centre - they will be joined by at least two other family doctors.

We all hope this Ford Health Centre will be a success. The cost of the project is some £50,000 and much work has gone into the detailed planning, which has been awkward on a restricted site. From the local authority point of view we are restricted in building clinics; the Ministry favours health centres, and it is gratifying that in the case of the Ford Health Centre we have the support of the family doctors. If everyone works together, we can bring the best of health services to the people on the new and established estates.

## FUTURE IDEAS FOR HEALTH CENTRE PROVISION

The difficulty in Birkenhead in planning health centres is that Birkenhead developed alongside the river and the port. The houses built at the time of the industrial revolution were all built in these down town areas and the family doctors' practice premises were also in these areas.

As the unfit houses have been cleared and people re-housed in peripheral estates, the family doctors have had their practices split and they have found it difficult to decide whether to stay put or move out to the new areas. In the main the former has been the case and the patients have travelled into town to visit the doctors' surgeries. With difficulties with the transport services, which have increased over the last few years, we must provide more services to the peripheral part of Birkenhead, and always our aim should be to link the local authority service to the family doctors by the attachment of nursing services.

In the future planning for the coming year, we are to contemplate an arc of surgeries on land at the rear of the existent South Clinic. This clinic is providing excellent local authority services at the present time. It is to be hoped that we can develop this and other ideas for Health Centres in the years to come. There are many problems to be solved, but this year all interested parties have shown much goodwill which we trust will increase as the Health Centres open.

### CARE OF MOTHERS AND YOUNG CHILDREN

#### ANTE-NATAL CLINICS

##### Midwives' Clinics -

North Clinic	Tuesday	2.00 p.m.
Prenton Clinic	Wednesday	2.00 p.m.
South Clinic	Friday	2.00 p.m.

##### Relaxation Clinics -

North Clinic	Monday	1.30 p.m.
Prenton Clinic	Wednesday	9.00 a.m.
South Clinic	Tuesday	9.00 a.m.

#### CHILD WELFARE CENTRES

At the end of the year, Child Welfare Centres were open as follows :-

Central Clinic	Wednesday	2 - 4 p.m.
South Clinic	Monday, Tuesday and Wednesday	2 - 4 p.m.
North Clinic	Wednesday and Thursday	2 - 4 p.m.
Balls Road Clinic	Thursday and Friday	2 - 4 p.m.
Upton Clinic	Tuesday and Friday	2 - 4 p.m.
Woodchurch Clinic	Monday and Wednesday	2 - 4 p.m.
Prenton Clinic	Monday and Thursday	2 - 4 p.m.
Thingwall Clinic	Friday	2 - 4 p.m.

Part-time doctors have helped to staff the Child Welfare Clinics; without their excellent assistance the service could not have been maintained. It is the practice to have a doctor in attendance at as many child welfare sessions as possible.

Where the premises are well-built, new and attractive, there are usually higher attendances. However, we have been a little disappointed to find that the clinic opened at the new Social Services Centre in October, 1969, has had low attendances. These are early days in the opening of any new child welfare clinic, but if we are to build up the immunisation and vaccination rates and protect the children of Birkenhead, then we hope to see more parents bringing their children. This is but one of the many helps that the new centre can provide for the citizens of Birkenhead. One of the troubles is that many of the down town families have been re-housed to the peripheral parts of the town, but there are still many children in the high rise central flats who could attend the Social Services Centre.

#### VOLUNTARY AGENCIES ASSISTED BY LOCAL AUTHORITY

St. Elizabeth's Convent Clinic was held on 50 occasions.  
Number of attendances: 112 First Visits and 1,435 Re-Visits.

#### WELFARE FOODS

The issue of Welfare Foods on behalf of the Ministry of Health continues from the nine distribution centres, but sales have again decreased.

Other authorities share this experience and it is evident that more children are being given proprietary milk foods and vitamin products.

#### DISTRIBUTION OF WELFARE FOODS - ISSUES

	<u>National Dried Milk</u>	<u>Cod Liver Oil</u>	<u>Vitamins</u>	<u>Orange Juice</u>
1965	12,162	1,622	2,403	21,331
1966	7,927	1,454	2,091	21,737
1967	6,281	1,197	1,798	21,755
1968	4,770	1,247	1,427	20,581
1969	2,445	1,144	1,457	21,209

#### DENTAL TREATMENT

By arrangement with the Education Committee, expectant and nursing mothers and children under five years of age can receive dental treatment by the School Dental Staff at the School Dental Clinic. During the year dental care was provided as follows :-

	Examined	Treated	Fill- ings	Extrac- tions	General Anaesthetics	Dentures provided
Expectant & Nursing Mothers	12	11	17	11	2	4
Children under 5	124	82	31	180	71	-



RECORD OF CLINIC ATTENDANCES - CHILD WELFARE

Clinic	Total Attendances		Total	No. Seen by Doctor	Doctor Sessions	Year of Birth for those making first attendance this year			Total Attenders	Total Sessions
	First Visits	Re-Visits				1969	1968	1967-4		
North	275	3777	4052	1614	94	275	206	278	759	102
South	444	5209	5653	2113	96	385	362	379	1126	152
Central	82	808	890	339	45	79	55	47	181	50
Balls Road	254	4175	4429	1561	97	254	257	232	743	101
Upton	188	2182	2370	820	92	188	167	122	477	100
Woodchurch	156	2168	2324	832	91	120	115	94	329	100
Prenton	181	4125	4306	729	50	150	141	125	416	100
Thingwall	59	1479	1538	183	25	54	44	54	152	50
Totals:	1639	23923	25562	8196	590	1505	1347	1331	4183	755

NATIONAL HEALTH SERVICE (FAMILY PLANNING) ACT, 1967.

The Family Planning Association has for many years run clinics at their premises in Oxtou Road. Increasing numbers of patients attended from Birkenhead and the surrounding district. The numbers of new patients seen in 1969 was 1,091, of whom 509 were from Birkenhead. The increase occurred despite the fact that new clinics are opening in the surrounding area.

During the year advice was available to all, including the unmarried, through a clinic run by the Merseyside Young People's Association Committee.

The problem with family planning is that the advice and help tend to be received by the more privileged people in the town. This is true in spite of the fact that the Local Authority has agreed to pay the Family Planning Association for advice and treatment of all medical cases, and also certain families in severe need can be given help on social grounds; these cases may be helped free of charge or they may be asked to pay for their prescriptions and supplies. On the agreement of the Medical Officer of Health, increasing numbers of families were assisted in this way in 1969.

In an endeavour to get help to the more under-privileged families, the Family Planning Association opened a clinic in the Local Authority North Clinic. By the end of the year the number attending was poor. This is surprising when one thinks of some over-burdened families at the North end of the town.

It would seem obvious that planning of children is essential, but quite often people only come for help when they have grave difficulty in supporting too many in the family. It is then a matter of contraception rather than planning or sterilization seems the only answer.

During the year we have been asked for advice on several occasions by women seeking abortion. It is a sad commentary on our legislation that Parliament only managed to pass the first Family Planning Act - a private member's Bill from one of our local Members of Parliament, Dr. Edwin Brooks - a few weeks before the Abortion Law Reform Act. Every abortion must be seen as lack of thought and action in relation to contraception or family planning.

CARE OF PREMATURE INFANTS

During the year 206 premature babies were born. 24 were stillborn and 182 born alive. 192 were born in hospital and 14 at home. 8 of the babies born at home were transferred to the Premature Baby Unit for nursing. All premature infants are the subject of particular attention by Midwives and Health Visitors and are included in the "At Risk" register.

INCIDENCE OF CONGENITAL ABNORMALITIES

Of the 42 congenital abnormalities reported on the birth notifications, seven concerned children whose home addresses were outside the Borough.

The 35 Birkenhead cases were as follows :-

Spina Bifida	7
Hydrocephalus	4
Anencephalus	9
Meningocele	2
Imperforated Anus	1
Talipes	2
Deformed Limbs	2
Hypospadias	3
Hare Lip	2
Hermaphrodite	1
Mongol	1
Cleft Palate	1

It is seen that the greatest incidence of congenital abnormality is in defects of the central nervous system. Fortunately some of the more severely deformed children died at birth.

The specialist health visitor who studies spina bifida and hydrocephalic children in the community reports :-

Number of children with spina bifida and hydrocephalus in Birkenhead	=	37
Number of children attending school	-	18
Number of children not attending school (at home)	-	19

Number per year surviving :-

1964 - 3	1967 - 10 + 1 died and 1 transfer
1965 - 3	1968 - 4 + 1 died
1966 - 2 + 1 transfer	1969 - 3 + 1 died

It is obvious from the numbers of babies born with spina bifida and hydrocephalus in 1969 recorded on the Congenital Malformations register that, in addition to the one that died in the first year of life, several were stillbirths or died at birth. Had they survived, as occurred in 1967 births, the numbers of these handicapped children in our community would be higher still. Medical science has given life to these children - now we must provide them with fullness of life. To take one example, a new school for physically handicapped children is needed.

"AT RISK" REGISTER

The Ministry of Health has asked Health Departments to keep a register of "at risk" babies born each year. The schedule of "risk" groups prepared by Dr. Sheridan has been in use for some time. Help has been given by the family doctors and the hospital staff in selecting these babies. It is fairly easy to pick out those babies obviously at risk; it is more difficult to pick out

those where the risk may seem minimal but this child may have a latent handicap.

A system based on Mary Sheridan tests has been introduced in the Borough in 1969, and it is such that every baby born is tested at 6-8 weeks, 6-9 months, 12-18 months. Before testing begins, the health visitor asks the mother a standard series of questions which may highlight even those babies at minimal risk. The conscientious health visitor by this new method will soon recognise quickly what is within the range of normality at each age. Those babies who seem to show abnormalities are referred to the doctors and possibly to the paediatricians.

During the year, 499 new cases were placed on the "at risk" register and 384 were removed after review; a total of 593 by 31st December, 1969, compared with 458 at 31st December, 1968.

This work should have the desired result of enabling earlier diagnosis and treatment of handicapped children.

#### CONVALESCENT TREATMENT

During the year no pre-school children were referred for convalescence, which reflects the improvement in general health of young children.

#### DAY CARE OF CHILDREN

#### NURSERIES AND CHILD MINDERS REGULATIONS ACT, 1948, AS AMENDED BY THE HEALTH SERVICES AND PUBLIC HEALTH ACT, 1968.

At the end of the year there were 4 private nurseries, 4 child minders, 3 nursery schools and 23 playgroups registered under the Act.

All registered premises are the subject of periodic visits by medical staff in addition to the visits of the Health Visitors for the area.

The estimated population of children under 5 is 13,000. There is a growing need for playgroups and nursery classes. Present registered accommodation provides for only 738 places, but by having different children on different days some playgroups give the service to more children than their registrations indicate.

Miss I. Asquith, the specialist Health Visitor, who supervises Nurseries, Playgroups and Child Minders, has submitted the following report :-

"Of the 23 playgroups, 9 of which registered during the year, about half open daily, others two or three days a week, and usually children attend once or twice a week. About 1,000 pre-school children are getting some play experience through private enterprise. Charges vary from 1/- to 6/- per session and there are many enquiries about new groups starting.

Watson Street Playgroup has been taken over by the Children's Committee.



There are some playgroups which are in the charge of nursery trained nurses, but most of them are not.

During the period September - December, 1969, a course of ten evening classes for existing Playgroup Leaders was held in the premises of the Education Department. The lecturers gave their services free. 12/- per person was charged by the Education Department and 30 Playgroup Leaders attended the course, which was as follows :-

A COURSE FOR PRE-SCHOOL PLAYGROUP LEADERS

1. The role of the adult in the playgroup. Slides.	- Miss Ostick, Inspector of Nursery Schools, Birkenhead Education Department.
2. Development of 2-5 year olds.	- Dr. Nicholas, Medical Officer of Health, Birkenhead.
3. Layout of play material and improvisation.	- Mrs. Brady, S.C.F. Playgroup Leader.
4. Psychological approach to play. Behaviour problems.	- Matron of a Children's Home, Pensby Children's Wing. Slides.
5. Language development in young children.	- Mrs. Wilson, Speech Therapist, Birkenhead Health Department.
6. Music and movement. Improvised musical instruments.	- A musical group.
7. Services available for children 0-5. Safety precautions, treatment of minor accidents.	- Dr. Nicholas, Medical Officer of Health, Birkenhead.
8. Art in the playgroup.	- Miss McLeod, Nursery School Head Teacher, Birkenhead.
9. Administration.	- Dr. Nicholas, Medical Officer of Health, Birkenhead.
10. Panel of Playgroup Leaders.	- Chairman, Miss Tomlinson.

The course was greatly appreciated and arrangements were made to hold regular monthly meetings in North Clinic for the purpose of discussion, distribution of literature, including the loan of books on child care in relation to play, also the raising of funds among themselves to provide speakers.

There are 4 registered child minders and enquiries and applications are being received.



CAVENDISH ROAD

ROCK FERRY

Week Ended	Total Attend-ances	Staff	REMARKS	Total Attend-ances	Staff	REMARKS
3. 1.69.	51	4	1 staff on leave, one on loan to Rock Ferry	36	3	1 staff sick, 1 on leave
10. 1.69.	84	4	1 staff on leave, 1 sick	84	4	1 staff sick
17. 1.69.	92	5		92	4	1 staff sick
24. 1.69.	106	5		78	4	1 staff sick
31. 1.69.	100	4	1 staff on leave	30	4	1 staff sick, DYSENTERY AND SERIOUS BREAK-IN
7. 2.69.	102	4	1 staff on leave	31	3	2 staff sick, DYSENTERY
14. 2.69.	99	5		27	4	1 staff sick, DYSENTERY
21. 2.69.	87	4	1 staff sick	54	4	1 staff on leave, DYSENTERY
28. 2.69.	100	3	1 staff sick, 1 on leave	69	4	1 staff on leave
7. 3.69.	94	6		62	4	1 staff sick
14. 3.69.	72	4	1 staff sick, 1 on leave	72	4	1 staff sick
21. 3.69.	83	5	1 staff on leave	52	4	1 staff sick
28. 3.69.	91	4	1 staff on leave, 1 sick	51	4	1 staff sick
4. 4.69.	39	4	1 staff sick, DYSENTERY, 4 day week	46	3	1 staff sick, 1 on leave, 4 day week (Good Friday)
11. 4.69.	31	3	2 staff sick, 1 on leave, DYSENTERY	42	4	1 staff on leave
18. 4.69.	34	4	2 staff sick, DYSENTERY	66	4	1 staff off sick
25. 4.69.	19	4	2 staff sick, DYSENTERY	57	4	1 staff off sick
2. 5.69.	24	4	2 staff sick, DYSENTERY	74	4	1 staff off sick
9. 5.69.	66	4	1 staff sick	70	5	
16. 5.69.	86	4	1 staff sick	79	5	
23. 5.69.	99	4	1 staff sick	101	5	
30. 5.69.	87	4	1 staff sick, 4 day week (Whit)	80	4	1 staff on leave, 4 day week
6. 6.69.	130	5		94	5	
13. 6.69.	138	5	1 staff on leave	112	5	
20. 6.69.	116	4	1 staff on leave	113	5	
27. 6.69.	116	4		98	5	

4. 7.69.	134	5	1 staff on loan from Rock Ferry	85	4	1 staff on loan to Cavendish Road
11. 7.69.	129	4	1 staff on leave	95	4	1 staff on leave
18. 7.69.	118	4	1 staff on leave	70	3	1 staff left
25. 7.69.	105	5	1 staff on leave	63	3	Factory holidays
1. 8.69.	64	5	Factory holidays	64	3	Factory holidays
8. 8.69.	75	3	2 staff on leave	42	3	
15. 8.69.	88	3	2 staff on leave	62	3	
22. 8.69.	120	5		64	2	1 staff on leave
29. 8.69.	116	3	1 staff on leave, 1 left	62	2	1 staff on leave
5. 9.69.	79	4	4 day week	44	3	4 day week
12. 9.69.	99	4	1 staff on leave	54	2	1 staff off sick
19. 9.69.	116	4	1 staff on loan to Rock Ferry	47	3	1 staff from Cavendish Road removal to new nursery
26. 9.69.	116	5		53	3	
3.10.69.	106	5		55	2	1 staff off sick
10.10.69.	119	5		55	3	1 staff off sick, DYSENTERY
17.10.69.	122	3	2 staff off sick	57	4	DYSENTERY
24.10.69.	113	5		41	3	DYSENTERY, 1 staff on leave
31.10.69.	109	5		63	3	1 staff on leave
7.11.69.	94	5		64	4	
14.11.69.	106	5		73	4	
21.11.69.	113	5		78	4	
28.11.69.	99	5		78	4	
5.12.69.	108	4	1 staff on leave	50	3	1 staff on leave
12.12.69.	112	4	1 staff off sick	50	4	
19.12.69.	103	5		73	4	
26.12.69.	32	4	1 staff on leave, 2 day week	16	4	2 day week, Christmas
2. 1.70.	42	3	1 staff on leave, 1 sick, 4 days, influenza	34	3	4 day week, influenza, 1 staff left
	4,883			3,362		

Maximum weekly attendance at either nursery, 25 places, 5 days = 125.

From the middle of August until 19th September, the staff at Rock Ferry were having to divide their time between the old and new nurseries receiving stock, etc.

All private nurseries, nursery schools, playgroups and child minders have been visited periodically, advice has been given and defects discussed. The work continues of accommodating children, some on a temporary basis, in the Corporation Day Nurseries, usually in cases of social need."

### DAY NURSERIES

During the year, efforts were made to maintain a higher attendance at the day nurseries by admitting on a temporary basis children with handicaps or from poor home conditions whom the Health Visitors recommended for admission, either in the interests of the children or the parents. Difficulties are experienced with such admissions, however, as frequently the parents do not avail themselves of the vacancies when they arise, or if it becomes necessary to ask them to remove the children in favour of urgent cases they are reluctant to do so and are not willing to remain on the register to await further temporary vacancies.

### DAY NURSERIES - ATTENDANCES

Name of Nursery	Capacity	Number on register at end of the year		Average daily attendances during the year	
		0-2	2-5	0-2	2-5
Cavendish Road	25 places	7	18	6	13
Rock Ferry	25 places	8	10	6	7

The low average attendance at the Rock Ferry Nursery was due in part to (i) an outbreak of dysentery, (ii) shortage of staff, (iii) transfer of the Nursery from the rented premises at 506 Old Chester Road to the new purpose-built Nursery comprising the ground-floor of a block of flats at Devon Gardens. At the time of the removal it was necessary to keep the numbers low for several weeks while 'teething troubles' in the new building were corrected.

It is particularly difficult to keep up the numbers in 25-place Day Nurseries; 50-place ones are much more economical to run and staff shortages can be absorbed more easily, apart from which larger nurseries can usually be recognised as a training nursery, a privilege so far refused to either of our day nurseries.

In the long term the plan is to increase and upgrade the Cavendish Road Nursery - money has been put in the capital estimates for this work to be carried out in 1972. If this project is put into effect, the nursery can bring increased help.

MISS G. ENNESCOTT, who was Matron of Cavendish Road Day Nursery, died in May, 1969. She joined the staff in January, 1947, as deputy Matron and was appointed Matron in 1951, a post that she held in Palm Grove Nursery, the Old Chester Road Nursery and later at Cavendish Road Day Nursery.

She had a special interest in children with handicapping conditions, and up to the time of her death was frequently visited by children and young people who had been in her care in the Nurseries. The length of her service is shown, in that some of these young people had left school. Indeed, one child who attended Cavendish Road Day Nursery in 1968 was the daughter of one of Miss Ennescott's early charges.

The people of Birkenhead should give thanks for one who had shown such service and devotion to children at the North end of the town, many of whom would benefit by nursery care.

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## MIDWIFERY

DOMICILIARY STAFF

1 Non-Medical Supervisor of Midwives  
14 Midwives

The establishment of 14 Midwives remained complete throughout the year.

NUMBER OF MIDWIVES

During the year, 61 Midwives gave notice of their intention to practise in the Borough :-

Municipal Midwives	..	..	..	..	..	14
Midwives in Hospitals and Institutions					..	47
						<hr/> 61

## SUPERVISION

## Inspection of Midwives

Visits to Midwives' homes	..	..	..	..	..	28
Office Interviews	..	..	..	..	..	421

Pupil Midwives

Supervision of Nursings	..	..	..	..	..	2
Lecture Sessions	..	..	..	..	..	4

Miscellaneous Visits

Cases requiring Medical Aid .. .. .	21
Cases of Puerperal Pyrexia .. .. .	-
Cases of Ophthalmia Neonatorum .. .. .	-
Expectant Mothers .. .. .	32
*Visits to Ante-Natal Clinics .. .. .	89
*Visits to Relaxation Clinics .. .. .	105

\*The above figures include both Non-Medical Supervisor's visits and those paid by other Midwives.

NUMBER OF CASES ATTENDED BY DOMICILIARY MIDWIVES

The number was 151, of which 120 were attended by Midwives alone (in 1968 there were 237 cases, of which 185 were attended by Midwives alone).

Although the actual number of domiciliary births shows a marked decline, the overall number of births remains approximately as in 1968.

CASES REQUIRING MEDICAL AID

96 cases were notified by Municipal Midwives in which medical aid had been called, as compared with 107 in 1968. 36 were ante-natal, 31 post-natal and 29 for babies.

NOTIFICATIONS RECEIVED FROM MIDWIVES

Stillbirths .. .. .	-
Liability to be a source of infection ..	3
Laying out of a dead body .. .. .	-
Baby deaths .. .. .	-

MUNICIPAL MIDWIVES

The following is a summary of the work of the Municipal Midwives during the year :-

	<u>1968</u>	<u>1969</u>
Number of bookings	271	220
Number of births attended		
(a) Doctor present	52)	31)
(b) Doctor not present	185) 237	120) 151
Administration of gas and air analgesia	218	109
Administration of pethidine	192	93
Total visits paid to patients	22,740	25,494
Number of planned early discharge cases		1,144
Actual number of early discharge cases		2,056



OPHTHALMIA NEONATORUM

No cases were notified.

ANTE-NATAL CLINICS

After much discussion and thought, it was decided to re-introduce the Midwives' Ante-Natal Clinics. In April the Ante-Natal Clinics at Prenton, serving Prenton, Woodchurch, Thingwall and part of Oxton was re-commenced, followed in two days by the Ante-Natal Clinic in the South end of the town, serving Higher and Lower Tranmere and Rock Ferry. These two Clinics proved to be so popular with the mothers-to-be, that the Clinic in the North end of the town was also re-commenced at the beginning of September. This serves part of Oxton, North end, Bidston, part of Upton, Ford and Noctorum.

These Clinic sessions have been much appreciated by the expectant mothers, and the Midwives feel that a more satisfactory ante-natal care is now being given.

Attendances were as follows :-

* Prenton Clinic (Wednesdays, 2 - 4 p.m.)	35
* South Clinic (Fridays, 2 - 4 p.m.)	60
** North Clinic (Tuesdays, 2 - 4 p.m.)	69
Total number of patients	<hr/> 164
Total number of sessions	89

\* From April, 1969.

\*\* From September, 1969.

ATTENDANCE AT FAMILY DOCTORS' ANTE-NATAL CLINICS

During the year two additional requests were received from Family Doctors for Midwives to attend ante-natal sessions at their surgeries. Midwives are already attending sessions held in the surgeries of five medical practices. This is a service which is most satisfactory from the points of view of both Family Doctors and Domiciliary Midwives, and it is felt that this demand will increase.

ATTENDANCES AT ST. CATHERINE'S HOSPITAL ANTE-NATAL CLINICS

Attendances of the Domiciliary Midwives at the Ante-Natal Clinics at St. Catherine's Hospital have been maintained during the year.

EARLY DISCHARGES FROM HOSPITAL

During the year the number of requests for assessment of home conditions for early discharge has risen to 1961; of these 475 were refused either on social or housing grounds as being unsuitable. The actual number of patients who were discharged from hospital prior to the tenth day was 2056; of these 1144

were discharged within 72 hours.

### DISTRICT MIDWIFERY TRAINING

This has been most disappointing during 1969, as no pupils have applied to take the Part II Training until later in the year. Two Pupil Midwives commenced domiciliary training on 1st December, 1969.

### REFRESHER COURSES

In April, 1969, Miss Pringle attended a Course held at Durham University for Non-Medical Supervisors of Midwives; one Domiciliary Midwife, Mrs. Charsley, attended a Refresher Course in July, also at Durham University. Much benefit is derived from attendance at these courses.

### CARE OF UNMARRIED MOTHERS

In 1969, Moral Welfare Workers referred 23 cases to the Non-Medical Supervisor of Midwives; 6 of these were aged 16 years or less.

	<u>1966</u>	<u>1967</u>	<u>1968</u>	<u>1969</u>
Total number of girls aged 16 and under who gave birth to live babies:	8	5	-	6
Ages of mothers at date of birth of their baby:-				
Age last birthday: 16 yrs.	5	5	-	4
15 yrs.	2	-	-	1
14 yrs.	1	-	-	1
	<u>8</u>	<u>5</u>	<u>-</u>	<u>6</u>

These figures apply only to the number of unmarried mothers who seek financial assistance from the Health Committee; it takes no account of those living in Birkenhead who are delivered in the Maternity Hospital or the Maternity Department of St. Catherine's Hospital, or the girls who change their minds after making application for assistance.

The close co-operation with both Birkenhead and Wirral Moral Welfare Association and the Church Authorities has been maintained. The number of mothers seeking help remained fairly static, but the number of visits to each patient shows a slight increase.

HEALTH VISITINGSTAFF

On the 31st December, 1969, the staff comprised :-

- Superintendent Health Visitor
- 1 Group Adviser
- 1 Field Work Instructor
- 19 Health Visitors
- 3 Part-time Health Visitors
- 1 School Nurse - S.R.N.
- 3 Part-time School Nurses - S.R.N.  
(Engaged mornings only during  
School Term)
- 2 S.R.N.'s on Sessional Basis

Included in the above were 2 Student Health Visitors who completed their training in 1969. They were successful in passing their examination and joined the staff in September. The average case load per Health Visitor was 462 families. This is far higher than is recommended; a case load of 300 is thought to be ideal.

STUDENT HEALTH VISITORS

Two Student Health Visitors were recruited and commenced at the Liverpool School in September.

STAFF TRAINING

Two Health Visitors attended a Refresher Course in Manchester; one S.R.N. attended the two-week course in Audiometry at the Department of Audiology and Education of the Deaf at the University of Manchester.

CARE OF THE PRE-SCHOOL CHILD

As from 1st April, 1969, we commenced the Phenylketonuria Guthrie Testing programme. With the parents' consent, 1,213 blood samples were taken and 238 urine papers. We did not have a positive phenylketonuria during 1969. At the same time we commenced the "Mary Sheridan Progress Tests" on all children. Previously, only those children known to be born 'at risk' were screened for hearing. Now, however, all babies are screened and tests of progress applied at 6-8 weeks, 7-9 months and 12-18 months. Although time-consuming, it is very satisfying to the Health Visitors and has been well accepted and appreciated by the parents. It is felt that these tests will lessen the risk of any handicapping condition being missed, and when found to have a handicap the child can receive any help required at a much earlier age.

HEARING TESTING - Children 0-5 years

Number 'At Risk' tested	306
Number found unsatisfactory	10
Number found satisfactory at 2nd test	6
Number found to E.N.T. surgeon	2
Number subnormal - unable to test	2

AUDIOMETRY

Number of children tested	4,250
Number of children referred by the School Medical Officer	604

AUDIOMETRY - MEDICAL OFFICER SESSIONS

Number of children seen	782
Number of children to recall	239
Number of children referred to E.N.T.	168
Number of children referred to G.P.	10
Number of children discharged	354

HYGIENE IN SCHOOL

Total number of children examined	50,435
Total number of children found unsatisfactory	4,201
Total number of children remaining	474

The problem of hygiene in Birkenhead Schools is linked with poor hygiene in some homes. One child with infested hair, entering school after a school holiday, will rapidly infect clean children. With 85 schools in Birkenhead to visit, the health visitors and school nurses have much work. It is obvious that much of this hygiene work can be adequately done by S.E.N.'s, and it is hoped that such appointments will soon be agreed, thus relieving the health visitors for work more commensurate with their expensive training. The State Enrolled Nurse or School Nurses need facilities to clean these children, particularly from problem families, and it is gratifying to know that by the end of the year there is an agreed plan to construct a bathing centre at Balls Road Clinic. In a town which has so many houses without a bath, this bathing service should be well used.

PAEDIATRICS

Liaison between the Paediatric Physician and the Health Visitors was maintained throughout the year. Health Visitors continued to attend the Paediatric Out-Patients' Clinics and Ward Rounds at St. Catherine's and the Children's Hospital with close co-operation with the Medical Social Workers on home and social problems. One Health Visitor works in close co-operation with Mr. P.P. Rickham from Alder Hey Hospital, and this Health Visitor visits all children born with spina bifida; one Health Visitor attends Dr. Zausmer's Child Guidance Clinic. These links with the paediatric and child psychiatric teams have been helpful to the staff and must be beneficial for the patients.

HEALTH EDUCATION

The Health Visitors have joined with Dr. Fergusson, Health Education Officer, and many others in furthering health education, which needs developing in Birkenhead.

Mothercraft classes are held weekly at 3 Clinics and Relaxation Sessions conducted by a Physiotherapist. A Health Visitor attends St. Catherine's Ante-Natal Clinic weekly for



Relaxation and Mothercraft. The Health Visitors attend the Cytology Session for the showing and instruction of the film on "Self-Examination of the Breast"; the teaching of mothercraft, hygiene and personal relationships continued in the Secondary Modern Girls' Schools.

#### STATISTICS OF WORK CARRIED OUT BY HEALTH VISITORS

2,315 visits were paid to infants under one year

11,099 subsequent visits were paid to infants under one year

18,500 routine visits were paid to infants between one and five years of age

819 visits were paid to expectant mothers

1,882 visits were paid in connection with miscellaneous matters

7,368 visits were paid in which no access was obtained

1,909 first visits were paid to aged

50 first visits were paid to tuberculous patients

437 subsequent visits were paid to tuberculous patients

#### PROBLEM FAMILIES

The Health Visitors have a very satisfactory relationship with the other social workers dealing with this difficult group. The monthly co-ordinating meets are most helpful, and support for each other's actions is more readily forthcoming following a group consultation.

#### HEALTH VISITOR LIAISON/ATTACHMENT TO FAMILY DOCTORS

Liaison between the Health Visitors and General Practitioners has strengthened throughout the year. Complete attachment has not been found possible due to the lack of suitable premises and the very wide geographical areas served by individual General Practitioners.

#### TUBERCULOSIS VISITING

The Health Visitors continue to carry out the duties of after-care of tuberculous patients and the submission of contacts.



GERIATRICS

An increasing amount of the Health Visitor's time was devoted to visiting the chronic and elderly sick, and to provide all necessary domiciliary help available. One Health Visitor attends the Geriatric Department at St. Catherine's Hospital weekly.

RE-HOUSING ON MEDICAL GROUNDS

The Health Visitors made many calls for the purposes of supplying reports on applications for re-housing on medical grounds.

CLINIC DUTIES AND ATTENDANCES

Infant Welfare .. .. .	1,895
Ante-Natal Relaxation .. .. .	267
Mothercraft (St. Catherine's Hospital) .. ..	60
Hearing Screening (under 5 years) .. .. .	127
Hospital Attendances: Geriatric Clinic .. ..	60
Paediatric Clinic .. ..	96

DISTRICT NURSINGSTAFF

- 1 Superintendent (Also Non-Medical Supervisor of Midwives)
- 1 Senior Queen's Nursing Sister
- 7 Queen's Nursing Sisters
- 2 Male Queen's Nurses
- 1 District Trained Nursing Sister
- 9 State Registered Nursing Sisters
- 1 Student

The staff situation has not been as satisfactory as in previous years, as there were two vacancies at the end of the year. These were caused by the resignations of two young married members of staff who left for family reasons.

Requests for district nursing showed a marked increase and the type of work has shown a tendency to change. There has been an increase in the number of visits paid during the year of almost 4,700, which is accounted for by an increase in the number of ante-natal patients requiring iron injections, also the increased numbers of sub-acute patients, both surgical and medical, being discharged earlier from hospital. The number of patients suffering from cancer shows a slight increase, but the number of visits to such patients is 500 in excess of the previous year.

The District Nursing Sisters continue to instruct the relatives of patients in home nursing care and, in a number of cases, the visits required for chronically sick patients has been reduced where the relatives are able to cope.

#### PRE-PACKED DRESSING SERVICE

This is a service which was introduced in one-third of the town in June, 1969, as a Pilot Scheme. The area covered includes Bidston, Upton, Woodchurch and Prenton. All patients living in these areas who require surgical dressings have pre-packed sterile dressings. These are packed by the District Nursing Staff but, in the near future, handicapped persons attending the Social Services Centre may take over the packing of these. The dressings are sterilized at St. Catherine's Hospital, but it is hoped eventually that we will have an autoclave installed in the Social Services Centre. The approximate number of dressings supplied since the scheme commenced was 1,440.

#### LOANS OF NURSING AIDS AND EQUIPMENT

The number of loans which have been requested has increased and once again has proved very diverse. Early in the year, a special "Marples" self-adjusting bed was purchased for use by the severely handicapped hemiplegic/cardiac patients.

The following articles were loaned during the year :-

- 82 Bed Pans
- 35 Urinals
- 55 Commodes
- 41 Air Rings
- 57 Back Rests
- 19 Wheel Chairs
- 1 Bed Table
- 1 Rubber Inflatable Lavatory Seat
- 15 Bed Cradles
- 19 Enuresis Alarms
- 6 Beds
- 10 Sets of Fracture Boards
- 11 Quadruped and Tripod Sticks
- 5 Paris Crutches
- 1 Free-Standing Chair Lift
- 4 Hoists
- 5 Walking Aids
- 3 Mattresses and Sectional Mattresses
- 1 Toilet Aid
- 1 "Ripple" Bed - on hire - which is used for specialised nursing.

Gifts of small nursing aids have been received from relatives of patients who no longer require them, and we have been most grateful to accept these items.

### INCONTINENT SICK

There has been an increase during the year in the number of requests for both Incontinence Sheets, which are an invaluable help to the relatives of incontinent, bed-fast patients, and Interliners for protective pants which are available for ambulant incontinent patients.

We have received many more requests for assistance from the parents of mentally handicapped children for both types of incontinence aids.

### MARIE CURIE MEMORIAL FOUNDATION WELFARE SCHEME, AND DAY AND NIGHT NURSING SCHEME

In the later part of 1969, it was decided to implement the above scheme in Birkenhead. This is a scheme whereby additional nursing help or welfare help is given to the relatives of patients suffering from cancer.

Appointments have been made of two part-time nursing staff - one State Enrolled Nurse and one Nursing Auxiliary - to undertake these nursing duties.

Up to the end of the year we had not been asked to supply help, but it is hoped that when the scheme becomes more widely known, that it will be well used and provide relief for relatives and comfort for patients suffering from cancer who are being nursed at home.

### VISIT OF STUDENT NURSES

As in previous years, the Student Nurses from Birkenhead School of Nursing spent one day on the district with a District Nursing Sister. This has proved most beneficial, and has undoubtedly been responsible for enquiries regarding appointments.

### TRAINING OF DISTRICT NURSES

One member of staff completed District Nurse Training during 1969, and was successful in obtaining the Certificate of the Department of Health and Social Security.

At the end of the year a further member of staff was in training.

HOME NURSING SERVICE

	New Cases put on Register during the year	Cases brought forward from previous year	No. of visits paid to all patients
Medical	991	551	39,591
Surgical	199	57	7,739
Infectious Diseases	1	-	34
Tuberculosis:			
Pulmonary	5	4	607
Non-Pulmonary	3	2	243
Maternal Complications	56	-	532
Others	-	-	1,316
TOTALS:	1,255	614	50,062

	<u>1969</u>	<u>(1968)</u>
Number of patients over 65 years	1,204	1,287
Number of visits paid to patients over 65	32,184	31,609
Number of patients under 5 at first visit	20	15
Number of visits paid to under 5's	168	78

VISITS BY SUPERINTENDENT

	<u>1969</u>	<u>(1968)</u>
Supervisory and Teaching Visits	595	216
Extra Calls	499	581
	<u>1,094</u>	<u>797</u>

CASES ON REGISTER

Brought forward from previous year .. .. .	614
New cases added to Register during year .. .. .	1,255
Total:	<u>1,869</u>

Classification of New Cases :-

(a) Referred by Doctors .. .. .	845
(b) Referred by Patients' relatives and friends ..	105
(c) Referred by Medical Officer of Health ..	74
(d) Referred by Hospitals .. .. .	227
(e) Referred by Other Sources .. .. .	-
Total:	<u>1,251</u>

CASES REMOVED FROM REGISTER DURING THE YEAR

(a) Convalescent .. .. .	440
(b) Transferred to Hospitals .. .. .	293
(c) Died .. .. .	169
(d) Left the District .. .. .	46
(e) Removed for Other Causes .. .. .	167
(f) Able to Manage .. .. .	62
Total:	<u>1,177</u>

CASES REMAINING ON REGISTER AT END OF YEAR

692 Cases

PATIENTS HAVING INJECTIONS ONLY

Card Code Number	Type of Injection	Number of Patients Nursed	Visits Paid
1	Insulin	21	1,941
2	Penicillin	62	504
3	Streptomycin	11	804
4	Imferon, Cytamen etc.	324	6,137
5	Mersalyl	32	874
6	Durabolin	27	460
7	GT.50	1	23
13	Morphia etc.	5	216
14	Others	55	1,639
		538	12,598



IMMUNISATION AND VACCINATION

The following is the programme of immunisation practised in the Health Department :-

<u>Age</u>	<u>Vaccine</u>	<u>Interval</u>
6 - 8 months	Triple (Diphtheria, Tetanus, Whooping Cough) and Poliomyelitis	1st) 6 - 8 weeks 2nd)
12 months	Measles Vaccination	
13 months	Smallpox Vaccination	
14 months	Triple and Poliomyelitis	3rd
<u>SCHOOL ENTRY</u>	(Parents to be approached at Medical Examination of Entrants)	
5 - 7 years	Diphtheria/Tetanus Booster and Poliomyelitis	4th
12 years	B.C.G. Vaccination	

Consent forms were again sent to parents of children reaching the age of six months and to parents of school entrants aged five years.

A moderate response was obtained once again from the parents of school children but the figures relating to children under five years remain disappointing.

DIPHTHERIA IMMUNISATIONIMMUNISATION IN 1969

	<u>Primary</u>	<u>Reinforcing Injections</u>
0 - 3 years	1,237	1,519
4 - 7 years	1,428	512
8 - 15 years	90	18
	<hr/>	<hr/>
	2,755	2,049
	<hr/>	<hr/>

	<u>Medical Officers</u>	<u>General Practitioners</u>
Immunisations against Diphtheria	15	3
Reinforcing Injections against Diphtheria	33	2
Triple Antigen	1,015	568
Triple Antigen (Reinforcing Injections)	1,104	366
Immunisations against Diphtheria and Tetanus	379	69
Immunisations against Diphtheria and Tetanus (Reinforcing Injections)	1,140	101
	<u>3,686</u>	<u>1,109</u>

#### IMMUNISATION AGAINST WHOOPING COUGH

	<u>Infant Welfare Centres</u>	<u>General Practitioners</u>
0 - 1 years	219	56
1 - 2 years	626	391
2 - 3 years	113	82
3 - 4 years	33	15
5 - 7 years	24	21
8 - 15 years	-	3
	<u>1,015</u>	<u>568</u>

#### IMMUNISATION AGAINST TETANUS

Tetanus immunisations were continued in the Infant and Junior Schools.

	<u>Primary</u>	<u>Reinforcing Injections</u>
0 - 3 years	1,517	1,235
4 - 7 years	502	1,417
8 - 15 years	38	118
	<u>2,057</u>	<u>2,770</u>

VACCINATION AGAINST SMALLPOX

By Medical Officers at Infant Welfare Centres 646

By General Practitioners 425

Age at Date of Vaccination	0 - 1 years	1 - 2 years	2 - 4 years	5 - 15 years	Total
Number Vaccinated	477	348	154	74	1,023
Number Re-Vaccinated	-	1	5	42	48

VACCINATION AGAINST MEASLES

	<u>Health Department</u>	<u>General Practitioners</u>	<u>Total</u>
0 - 3 years	390	151	541
4 - 7 years	227	62	289
8 - 15 years	21	4	25
	<u>638</u>	<u>217</u>	<u>855</u>

VACCINATION AGAINST POLIOMYELITIS

During 1969 the following were given :-

ORAL POLIOMYELITIS VACCINE

	Health Department	General Practitioners	Total
Oral Primary Course	955	479	1,434
4th Oral	996	358	1,354

B.C.G. VACCINATION - SCHOOL CHILDREN, 1969.

B.C.G. Vaccination was offered to 12-year olds during the year.

Children found to be positive following testing are sent for X-ray examination and certain cases are referred to the Chest Physician.

## Multiple Puncture Test

Parents Notified	Children Tested	Positive	Negative	Children given B.C.G.
3,278	2,573	293	2,280	2,280

VACCINATION AND IMMUNISATION OF CHILDREN IN BIRKENHEAD

LOCAL HEALTH AUTHORITY	PERCENTAGES OF CHILDREN VACCINATED BY 31ST DECEMBER, 1969						
	Children born in 1967			Children born in 1968			SMALLPOX (Children under 2)
	Whooping Cough (1)	Diphtheria (2)	Poliomyelitis (3)	Whooping Cough (4)	Diphtheria (5)	Poliomyelitis (6)	
Birkenhead	64	65	56	54	54	33	22
England and Wales	81	83	80	66	67	65	31

The table shows the percentages vaccinated and immunised in Birkenhead in 1967 and 1968 compared with the national figures for England and Wales.

The townspeople should note that we are well below the national average. A great many parents are not bothering to protect their children. It does not matter if the preventive injections are given by the family doctor or by the doctor at the clinic, provided the infant or school child receives the protection.

It is true that we have not had a case of virulent diphtheria in Birkenhead for some years, but should the germ become active again in the community many unprotected children would suffer, and we have too few doctors to cope with the rush of parents who are scared for the health of their children at the time of an outbreak. A planned immunisation programme properly accepted by a responsible community is what is required.

Our figure for poliomyelitis vaccination is appallingly low and compares most unfavourably with some other towns, and yet poliomyelitis vaccination by mouth is such a simple, painless procedure.

It is the responsibility of every parent to protect their children from preventable infectious diseases.



AMBULANCE SERVICE

I am indebted to the Chief Fire Officer for the following report on the Ambulance Service of the Borough :-

The Ambulance Service responded to 67,990 calls during the year, an increase of 1,147 over the previous year and Ambulances covered 215,590 miles in carrying out the year's work.

There was a downwards trend in False Alarm calls, the total being 124, seventeen less than 1969. Nevertheless, a considerable amount of time is still being spent answering these malicious calls and this waste of effort can, to some extent, be judged by the 438 miles of travel they involved. Of the 928 persons conveyed to hospitals as a result of accidents in the home, 416 had been involved in falls, 206 in taking overdoses of medicines or poisons of some sort or other, and 60 were suffering from burns.

On 1,851 occasions ambulances made journeys for which they were not required and a summary of these cases is included in the report. It is, however, worth emphasising that in respect of patients for whom ambulances had been ordered to take them either into hospital or to out-patient departments on more than 500 occasions the patients were not at home or not ready, on 253 occasions appointment errors accounted for the wasted journeys and on 89 occasions appointments had been cancelled without the Ambulance Service being informed.

It was possible during the year to send eight of the ambulance staff on training courses and this training is becoming increasingly necessary as commitments increase and the time available for training on ambulance stations becomes almost negligible.

It is to the credit of all ambulance personnel that although under a heavy work load, often having little time for meals, complaints are few and discipline good. In any year, the Service transports the equivalent of almost half the town's population or in more digestible figures, approximately eleven hundred people every week.

ESTABLISHMENT

<u>Rank</u>	<u>Approved</u>	<u>Actual</u> <u>31.12.1969.</u>
Station Officer	1	1
Deputy Station Officer	1	1
Section Leaders	4	4
Driver/Attendants	38	38
Cleaner/General Assistant	1	1
	<u>45</u>	<u>45</u>

Variations:

Resignations:	3 Driver/Attendants
Appointments:	5 Driver/Attendants

Courses Attended

The Ambulance Station Officer attended a one-week Study Course for Senior Ambulance Officers at the Civil Defence College, Easingwold.

Seven members attended Ambulance Training Courses at the Cheshire County Ambulance Training School, Wrenbury Hall, Cheshire.

Four members qualified as Instructors in First Aid and 39 qualified for First Aid awards at examinations conducted under the British Red Cross Society.

Examinations in First Aid ranged from first to sixteenth year grades, and the knowledge and experience derived from study and practical application of this subject is invaluable when applied by members to their every day work.

Ambulance Proficiency Certificates

Proficiency Certificates, awarded by the Secretary of State for Social Services, were received by 30 members of the Ambulance Service. The certificates are awarded to personnel assessed as competent over the whole range of operational duties in the Ambulance Service (including accident and emergency work).

Safe Driving Competition Sponsored by the Royal Society for the Prevention of Accidents

<u>Oak Leaf to 10-year Bar</u>	<u>10-year Medal</u>	<u>Bar to 5-year Medal</u>
8	2	8
<u>5-year Medal</u>	<u>Diploma</u>	
2	15	
Entries for 1969:	39	
Awards granted:	35	

Vehicles

<u>Type</u>	<u>Year</u>
1 Morris Ambulance, Diesel	1964
2 Morris Ambulances, Diesel	1965
1 Morris Ambulance, Diesel	1966
2 Morris Dual Purpose Ambulances, Diesel	1966
3 Morris Ambulances, Diesel	1967
2 Morris Ambulances, Diesel	1968
1 Morris Dual Purpose Ambulance, Diesel	1968
1 Commer Dual Purpose Ambulance, Petrol Engine	1965
1 BMC Dual Purpose Ambulance, Diesel	1969

CLASSIFICATION OF CALLS

		<u>Calls</u>	<u>Patients</u>	<u>Mileage</u>
<u>EMERGENCY</u>	Home Accidents	919	928	4,131
	Works Accidents	586	597	2,392
	Street Accidents	1,420	1,572	5,833
	Maternity	1,123	1,123	5,023
	Emergency Illness	2,491	2,491	10,403
<u>REMOVALS</u>	Ambulance	27,646	28,129	90,481
	Sitting Cars	31,868	31,868	91,182
<u>SPECIAL SERVICES</u>	Midwives	12	-	32
	Bedding	-	-	-
	Others	36	-	123
<u>AMBULANCES NOT REQUIRED</u>	Malicious False Alarms	124	-	438
	Others	1,765	-	5,552
		67,990	66,708	215,590

Special Services

A total of 155 Special Service calls were attended and included the conveyance of midwives on 32 occasions.

SUMMARY OF CALLSASSISTANCE TO AND FROM OTHER AUTHORITIES

	<u>Calls</u>	<u>Standbys</u>
Assistance to:		
Wallasey	29	16
Cheshire	31	-
Liverpool	2	-

AMBULANCES NOT REQUIRED

<u>Classification</u>	<u>Type</u>	<u>Calls</u>
<u>EMERGENCY</u>	Refused conveyance	190
	Removed - passing car, etc.	59
	Transport not required	315
<u>OUT PATIENTS</u>	Too ill to travel	206
	Made own way	107
	Appointment errors	253
	Wrong address	34
	Not at home or not ready	451
	Refused conveyance	34
	Case cancelled	50
<u>IN PATIENTS</u>	Wrong address	13
	Too ill to travel	3
	Made own way	31
	Not at home or not ready	52
	Refused conveyance	15
	Case cancelled	39
		<u>1,851</u>

HEALTH EDUCATION

(Dr. J. Fergusson, Health Education Officer,  
Joint Appointment with Wallasey County Borough.)

The Health Education Section of the Health Department is now well established, but like all new ventures, the patterns on which it is conducted are subject to constant re-arrangement and review.

The present method of the Health Education Officer contacting Heads of schools individually and offering to do a lecture or series of lectures is under review, and it is hoped that the proposed new method will prove to be more satisfactory. The broad outline of this scheme is that all schools should be advised of the facilities available and that the schools should request such services as they require from the Health Education Officer. In this way, the Health Education Section would be able to formulate a planned programme well in advance, enabling the Health Education programme to be built into the school syllabus. The exact method by which this scheme will be implemented is being outlined in a separate report.

The Health Education Officer has delivered lectures at many of the Birkenhead Schools and the subjects included :-

- First Aid
- The Accidental Poisoning of Children
- Smoking
- Dental Hygiene
- Obesity and Diets
- V.D. (on request)

CAMPAIGNS AND PROJECTS

These are either promoted within the Health Department, from the Health Education Section, or directly from the Ministry, as was the campaign to promote measles inoculation. A recent campaign promoted locally highlighted the danger of "Accidental Poisoning of Children".

Among those originating from the Health Education Section have been "Essential First Aid for Road Users". This has consisted of a series of lectures to upper forms in many schools and accompanied by duplicated leaflets written by the Health Education Officer, and handed out to the Audience. A different type of printed leaflet was also written by the Health Education Officer. These are distributed in the Motor Taxation Department with each motor or driving licence.

A series of lectures to school children has also been given on the subject of "Faulty Dieting", but it is thought that such lectures should be made available to the mothers also. One school has kindly arranged for mothers to be present when the film lecture is being given. Should this prove a success, it may well be repeated in other schools and with other subjects.



## B.S.E. (BREAST SELF-EXAMINATION)

This is a recent scheme and the methods of introducing it to the public is also new. All firms, stores, factories, hotels, employing women are visited by the Health Education Officer. Discussions take place with the Manager, Manageress, or sometimes, the Directors and arrangements are made for the Health Visitors to visit the establishments at a mutually convenient date. The Health Visitors demonstrate, by means of a film strip made locally at Clatterbridge Hospital, the method of B.S.E. A short talk on the necessity for early diagnosis in breast cancer is given. This has been enthusiastically received by virtually 100% of the local business firms.

Arrangements are being made to apply the same publicity methods to the subject of cervical cytology.

## INDIVIDUAL REQUESTS

During the year there have been requests for assistance from school children and professional workers.

## APPARATUS

Health Education work is sometimes hampered by lack of funds, but two exhibition stands have been purchased in addition to two screens, and a back projection unit has been constructed by the Health Education Officer.

## PUBLICITY

Great use is made of the Radio Merseyside Broadcasting Station. The staff are always most co-operative and helpful. Five broadcasts have been made, one for the measles campaign, one for accidents in the home, two for "Accidental Poisoning of Children" and one at the request of the programme director, "The Work of a Health Education Officer".

The local press have been most co-operative. Good coverage is always given to campaigns and schemes as they arise - usually accompanied by pictures.

Thanks are due to the Standing Conferences of Women's Organisations for the help they have given in carrying out many of the campaigns, particularly in the case of "Accidental Poisoning of Children" as without this help the distribution of posters would have been impossible; also to the Laird School of Art who have designed and produced some excellent posters at a nominal cost.

## THE SAFETY IN THE HOME CAMPAIGN

Although the general pattern employed was the usual one, that is, of school and adult lectures, posters, press articles and broadcasts, the broadcasts in this case took a different pattern. As the subject was so complex the broadcasts were made in the form of a weekly series, a different group of subjects being dealt with every week.



It is gratifying that in 1969 from accidents due to fireworks, Birkenhead had the lowest accident rate in the whole country.

### THE POISONS IN THE HOME CAMPAIGN

In addition to the methods already mentioned two more lines of approach were used. One was a "Poisons Amnesty". This scheme was successfully used in Bolton in 1966, and consisted in getting the co-operation of the local Pharmaceutical Society to agree to exhibit a card in chemists' shops advising the public to return all unused medicines, tablets, pills, etc.

The other method was the showing of a film on the subject hired from the B.M.A. This was shown at schools and clinics, in each case preceded by a lecture.

### CANCER EDUCATION

The majority of the talks are organised by the Merseyside Cancer Education Committee and fall into two or three groups. The first is a general lecture on cancer, its nature and the necessity for early diagnosis. The second and third lectures deal with B.S.E. and Cervical Cytology respectively. It is usual for these lectures to be followed by questions from the audience. Literature is also distributed. Lectures have been given to Women's Civic Organisations, Church Groups and Social Groups.

### LECTURES TO SCOUTS, YOUTH CLUBS, ETC.

These are usually on request and have included such subjects as First Aid, Smoking, Reproduction, V.D. and, in some cases, Cancer. They are always illustrated by a film or film strip.

### IN SERVICE LECTURES

These are given to Health Visitors and have included "The Use of the Sound Projector", "How to Lecture on Cancer", etc. One film lecture was given to student midwives on normal childbirth.

### CERVICAL CYTOLOGY, 1969

Number of women tested ..	..	..	..	847
Number of women re-tested ..	..	..	..	309
Number on waiting list ..	..	..	..	49

Of the 1,156 tested, 6 had positive smears and these women were referred to their general practitioners for further investigation. 36 women were advised to consult their doctors regarding minor conditions, although their smears were negative. The results of these 6 cases are as follows :-

Case 1 - Cone biopsy performed. Doubtful histology. Mainly chronic cervicitis with previous associated vaginal discharge.

Case 2 - Malignant cells confirmed on repeat smear. Amputation of cervix which showed doubtful histology. Mainly chronic cervicitis.

- Case 3 - Cone biopsy. Showed definite carcinoma change on histology.
- Case 4 - Referred to Clatterbridge Hospital for gynaecological opinion. Chronic cervicitis trichomonas. Did not seem to be established malignancy. Carcinoma-in-situ confirmed in cervix. No malignancy in body of uterus. Repeat smears of vaginal vault have so far proved negative.
- Case 5 - Referred to St. Catherine's Hospital for gynaecological opinion. This patient had had a previous sub-total hysterectomy. Cervical stump now removed. Histology showed no evidence of malignancy although the previous smears had definitely shown malignant cells. This patient had shown epithelioma growth in other parts of body.
- Case 6 - Cone biopsy of cervix. Definite carcinoma-in-situ. Repeat smears have since proved negative.

Consideration of these positive smear cases shows that they were detected at a rate of 6 per 1,000 women tested. This is the sort of detection rate expected in testing women in social classes I to III. If, however, we could start a campaign for the less privileged in the community we would undoubtedly find that in women of social class IV - V in Birkenhead a detection rate of 25-30/1,000. We should be enthusiastically sponsoring 'well women' clinics for women of the artisan classes, particularly those who have had several pregnancies. To test women with symptoms is more difficult and they should probably be seen at gynaecological clinics.

The fact is that Merseyside has a low figure of cervical smear tests compared with other areas of England. Indeed, we are just on the fringe of the problem and it is difficult to say whether it is shortage of technicians or shortage of interest, in that there seems still some doubt as to whether cervical smear testing will reduce the incidence of invasive cancer of the cervix in women. If the test is shown to influence mortality from carcinoma of the cervix, then presumably Merseyside women will be offered an increased service.

In the meantime, the two cervical cytology clinics are :-

North Clinic - Wednesday 9.30 a.m.  
South Clinic - Thursday 9.30 a.m.

and these are well attended. Indeed, we have a waiting list; with a publicity campaign we would have a long waiting list. It should be borne in mind that a cervical cytology programme without a proper recall and follow-up programme is probably of little value. Women should be re-tested every three to five years.

I am indebted to Mrs. P. Hobbs, Administrator of the Merseyside Cancer Education Committee, for the following report :-

#### TEACHING ON BREAST SELF-EXAMINATION

During 1968 the health visitors taught 1,188 women how to do breast self-examination, and in 1969 an evaluation of the programme was begun by the Merseyside Cancer Education Committee.

Much of the teaching had been done in various clinics but the health visitors also went out to groups of people at their place of work - municipal offices, factories, stores and schools - and to women's groups. The clinic sessions were not suitable for the follow-up procedures and the evaluation was confined to the other groups.

It was decided to allow at least one year to elapse between the teaching and the follow-up, and the surveying was, therefore, done in two stages; one in the summer of 1969 to groups taught during April to June 1968 (320), and the other early in January 1970 to groups taught during October to November 1968 (197).

The time-lag of one year was chosen because we teach that breast self-examination should be carried out monthly, and checking at a shorter interval would not have been sufficient for patterns of behaviour to become apparent. This does mean inevitably a loss of subjects due to removals, changing jobs etc. Thus, although a total of 517 women were to be followed up, this was reduced to 500 by the non-response of one firm to the invitation to take part in the survey and by removals etc. to 383.

There were only three outright refusals to complete the questionnaires, and in the event the response rate for completed questionnaires was 41.5% which is low, but not unusual for a postal questionnaire, and the findings should be useful. The data is being processed and will be reported on at a later date.

CHIROPODY

Mr. G.C.H. Burns, Chief Chiropodist, reports :-

During the past year we have provided chiropody treatment in the surgery as follows :-

- 3 sessions per week at South Clinic
- 3 sessions per week at North Clinic
- 1 session per week at Prenton Clinic
- 15 sessions per week at Social Services Centre

The three district clinics established in 1968 continue to be well attended. The majority of the surgery treatments, however, are carried out in the new purpose-built chiropody surgeries at the Social Services Centre. Patients have received surgery treatment at regular intervals throughout the year.

The domiciliary treatments are carried out mainly by private chiropodists working on a contractual basis.

During the course of 1969, 200 new domiciliary cases were treated by direct service, i.e. by the Chief Chiropodist and two sessional chiropodists (five sessions per week).

The following classes of patient remain eligible for treatment under the scheme :-

1. Persons of either sex over 65 years of age
2. Handicapped persons of all ages
3. Expectant mothers

Year	Place of Treatment				Total		Columns 2-7 Free	
	Surgery		Home of Patient					
	Cases	Treat-ments	Cases	Treat-ments	Cases	Treat-ments	Cases	Treat-ments
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
1969	948	5569	787	3431	1735	9000	1401	7313



T A B L E 1

Year	Aged 65 and Over	Handicapped Persons Under 65			Expectant Mothers	Total
		Blind	Old People's Homes	Total		
(1)	(2)	(3)	(4)	(5)	(6)	(7)
1969	1666	3	66	69	Nil	1735

T A B L E 2

Year	Patients Receiving Domiciliary Treatments				Patients Receiving Surgery Treatments				Total Patients Receiving Treatments			
	Free	2/6	5/-	Total	Free	2/6	5/-	Total	Free	2/6	5/-	Total
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
1969	653	90	44	787	748	130	70	948	1401	220	114	1735

T A B L E 3

Year	Domiciliary Treatments				Surgery Treatments				Grand Totals			
	Free	2/6	5/-	Total	Free	2/6	5/-	Total	Free	2/6	5/-	Total
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
1969	2890	379	162	3431	4423	802	344	5569	7313	1181	506	9000

In Birkenhead we have now established a comprehensive Chiropody Service run by the Local Authority under a Chief Chiropodist, who is able to co-ordinate a private (domiciliary) and a direct (clinic) service. By close co-operation from all those employed in the scheme there is an efficient service for the patients.



DOMESTIC HELP SERVICE.STAFF

One Domestic Help Organiser  
 Two Assistant Domestic Help Organisers  
 One Supervisor

Miss L. Dalziel, Domestic Help Organiser, reports :-

Statistics for year January to December, 1969 :-

Short Term Sickness and Maternity Cases	..	36
Chronic Sick, Aged and Infirm	.. ..	1,002
Psychiatric	.. ..	7
	<u>TOTAL:</u>	<u>1,045</u>

Visits made by Organiser and Assistants	..	2,336
Visits made by Supervisor	.. ..	4,524

Hours worked by Domestic Helps: 116,006½

(Figures for maternity cases decreased since 6s. 9d. charge commenced).

Recruitment only becomes difficult during school holidays.

Waiting list for employment consists of :-

21 Living in Woodchurch, Prenton and Upton  
 8 Living in North End and Town  
 5 Living in Rock Ferry and Tranmere  
 6 Living in Borough Road

We are able to draw from these sources as the necessity arises. Interviews are held every week and applicants taken on whenever work is available.

Now that people are living to a greater age, the need of this service is more essential, necessitating an increase in staff to overcome the problem caused, not only through increase in application for help, but for additional visits in some cases to possibly three or four sessions per week.

Additional help in the home will often keep these isolated elderly people out of hospital and expensive residential accommodation.

There are about 160 part-time Domestic Helps. The majority are married women with families. This helps them with their domestic help duties which are restricted to normal household requirements, i.e. shopping, cooking, washing and general housework. That is not to say that the work is easy and they need encouragement in the job and some training in how to work in difficult home situations, in situations of bad housing and in the inevitable problem of trying to feed the elderly person who is living on a pension.

MENTAL HEALTHSTAFF

One Senior Mental Welfare Officer

Four Mental Welfare Officers (Male)  
(One seconded to the Certificate in  
Social Work Course)

One Mental Welfare Assistant (Female)

In the North we have too few trained social workers and, with the number of places on the Social Work Course at Millbank College, Liverpool, oversubscribed, it was fortunate that one of the Mental Welfare Officers on the staff was able to study this two-year, full-time course. His secondment caused increased work, particularly night duty and weekend work for the remaining staff, and towards the end of the year a Mental Welfare Assistant post was established.

HOSTELS FOR THE SUBNORMAL - SHORT AND LONG STAY CARE

The overall visits to the mentally ill fell slightly during 1969, though the work for the mentally subnormal increased. The Senior Mental Welfare Officer spent much time planning with others two hostels for the severely subnormal. We were greatly helped in this planning by Miss Haskins, the Adviser in mental subnormality from the Ministry of Health and Social Security. Thus by the end of the year plans had been drawn up and approved and loan sanction agreed for:

A ten place hostel for mentally subnormal children on Noctorum Estate and,

A twenty-five place hostel for mentally subnormal adults on Ford Estate.

These hostels will commence building in 1970, and more will be written about them in the report of that year. Suffice it to say that both hostels are needed as Birkenhead has many retarded people needing short and long stay care. Up to the present we have had to rely on the hospitals for the subnormal to provide much of this help; now we shall have an added hostel provision in the community.

There is good liaison and help from the Consultants at Greaves Hall Hospital, Southport. The services of the hospitals will long be needed, particularly for children awaiting long stay care. Some severely disturbed children have been waiting for years for such admission and the stress on the families and particularly other children in these families must be very great.

TRAINING CENTRES - PRESENT AND FUTURE PLANS

The parents get some relief from the attendance of their retarded children and young people at the Training Centres. Birkenhead and Wallasey have a jointly run Adult Training Centre at Moreton and a similarly sponsored Junior Centre is well on the

way to completion at Moreton and will replace the old fashioned adapted Centre at Hale Road in Wallasey where so much good work is done.

The Adult Training Centre at Moreton is a hive of enthusiasm and activity. The subnormal adults, both men and women, receive social training and carry out varied light assembly work. The success of the contract work is a credit to the staff and to the industrious worker. During 1969 Mr. Davies, the Chief Training Officer, resigned to go to another post at Bolton Technical College, but his enthusiasm in Moreton was continued by his Deputy, Mr. Spence, who was appointed to succeed him.

Birkenhead people occupy 70 of the 120 places at the Adult Centre, but as there were more in the community needing help it was decided at the end of the year to recommend an additional Supervisor and increase the number attending to 140; 85 from Birkenhead and 55 from Wallasey.

There are still more who need help, and it is proposed to build another Sheltered Work Shop/Training Centre in Birkenhead in 1972. The site is on land at the rear of the Industrial Therapy Unit in Price Street. Here is an opportunity for a junction of services between a grant-aided organisation and a Training Centre built by the Local Authority.

#### REHABILITATION OF MENTALLY ILL

In furtherance of our rehabilitation of the mentally ill, selected cases have been accommodated at the hostels at Chapel Hey, Wallasey, and at Richmond Fellowship, Chester. Compared with the few who enter the hostels, there are many more who need rehabilitation in their homes on discharge from mental hospitals. The Mental Welfare Officers spend much time in helping families and in re-settling the recovered patient in work.

#### SPECIAL CARE FACILITIES

There are some children and young people crippled in mind and body who will never train or work. Some of these are at home and some are at 43 Shrewsbury Road, where the Spastics Society have a Centre which provides care. The cost of caring for these children is increasing, and the Corporation agreed in the latter part of 1969 to give a small per capita grant for each daily attendance of a child at Shrewsbury Road Centre. In 1970, with the opening of the new Junior Training Centre at Moreton, there will be a further 20 place special care unit, twelve places will be for Birkenhead children. A purpose-built vehicle is to be provided to assist in the transport of these handicapped pupils.

MENTAL HEALTH SERVICESTATISTICS - 1969MENTAL ILLNESSCases referred to Mental Welfare Department

By General Practitioners	294
By Police (including Courts)	35
By Others (General Hospital, N.A.B., Welfare)	177
By Psychiatric Hospitals (on discharge)	123
By Psychiatric Hospitals (on licence)	2
By Psychiatric Out-Patients Department	96
	<hr/> 717 <hr/>

Admissions to Hospitals (Arranged by the  
Mental Welfare Department)UNDER MENTAL HEALTH ACT 1959

Informal Admissions (Section 5)	326
Urgency Application (Section 29)	36
Observation (Section 25)	98
Treatment (Section 26)	4
Hospital Order (Section 60)	1
	<hr/> 465 <hr/>

REHABILITATION

Richmond Fellowship, Chester.	2
Chapel Hey, Moreton.	2
Y.M.C.A., Birkenhead.	-
	<hr/> 4 <hr/>

INDUSTRIAL THERAPY ORGANISATION

Number on Register at 31.12.69.	Male	17
	Female	10
		<hr/> 27 <hr/>

Average daily attendance 18

MENTAL SUBNORMALITYCases referred to Mental Welfare Department

By Education Committee	8
By General Practitioners	-
By Police (including Courts)	3
By Others (N.A.B., Welfare Department)	5
Transfer from Other Local Authorities	1
From Hospitals (discharges)	6
From Hospitals (licence)	-
	<hr/> 23

ADMISSIONS TO HOSPITALS

Informal Admissions (Section 5)	3
Treatment (Section 26)	2
Urgency Application (Section 29)	-
Court Orders (Section 60/61)	1
	<hr/> 6

SHORT TERM CARE ADMISSIONS

To Hospitals	18
To Other Establishments	27
	<hr/> 45

TRANSFERS OUT 1Deaths -WAITING LIST OF PATIENTS REQUIRING HOSPITAL CARE

Urgent	8
Less Urgent	7
	<hr/> 15



Appeals to Mental Health TribunalsJUNIOR TRAINING CENTRE

Number on Register at 31.12.69.	Male	24
	Female	23
		<hr/> 47
Average daily attendance		45

ADULT TRAINING CENTRE

Number on Register at 31.12.69.	Male	39
	Female	35
		<hr/> 74
Average daily attendance		62

POSITION AS AT 31.12.69.

Number in Hospital	234
Number under Guardianship	1
Number under Home Supervision	321
Number on Register	<hr/> 556

ADULT TRAINING CENTRE - FIGURES FOR 1969

	<u>MALES</u>		<u>FEMALES</u>	
	<u>ATTENDANCES</u>	<u>No. OF DAYS OPEN</u>	<u>ATTENDANCES</u>	<u>No. OF DAYS OPEN</u>
<u>JANUARY</u>	725	22	676	22
<u>FEBRUARY</u>	653	20	557	20
<u>MARCH</u>	719	21	597	21
<u>APRIL</u>	683	20	582	20
<u>MAY</u>	512	17	501	17
<u>JUNE</u>	693	21	639	21
<u>JULY</u>	611	19	537	19
<u>AUGUST</u>	139	5	119	5
<u>SEPTEMBER</u>	677	21	626	21
<u>OCTOBER</u>	745	20	647	20
<u>NOVEMBER</u>	719	20	594	20
<u>DECEMBER</u>	550	16	484	16
	<u>7426</u>	<u>222</u>	<u>6559</u>	<u>222</u>
	222/7426	33	222/6559	29
	Average daily		Average daily	
Total average daily total: 62				

JUNIOR TRAINING CENTRE - FIGURES FOR 1969

MALE AND FEMALE

	<u>ATTENDANCES</u>	<u>No. OF DAYS OPEN</u>
<u>JANUARY</u>	930	19
<u>FEBRUARY</u>	803	18
<u>MARCH</u>	970	22
<u>APRIL</u>	333	7
<u>MAY</u>	771	16
<u>JUNE</u>	1031	21
<u>JULY</u>	802	18
<u>AUGUST</u>	-	-
<u>SEPTEMBER</u>	697	16
<u>OCTOBER</u>	914	22
<u>NOVEMBER</u>	707	18
<u>DECEMBER</u>	607	15
	<u>8565</u>	<u>192</u>

192/8565

45 Average daily total

INDUSTRIAL THERAPY ORGANISATION - FIGURES FOR 1969

MALE AND FEMALE

	<u>ATTENDANCES</u>	<u>No. OF DAYS OPEN</u>
<u>JANUARY</u>	385	23
<u>FEBRUARY</u>	326	18
<u>MARCH</u>	341	21
<u>APRIL</u>	332	22
<u>MAY</u>	355	21
<u>JUNE</u>	433	21
<u>JULY</u>	407	23
<u>AUGUST</u>	357	21
<u>SEPTEMBER</u>	396	20
<u>OCTOBER</u>	478	23
<u>NOVEMBER</u>	405	18
<u>DECEMBER</u>	430	21
	<u>4645</u>	<u>252</u>

252/4645

18 Average daily total







# INFECTIOUS DISEASES

TABLE OF NOTIFIABLE DISEASES AFTER CORRECTION OF DIAGNOSIS

	1965		1966		1967		1968		1969	
	M	F	M	F	M	F	M	F	M	F
Diphtheria	-	-	-	-	-	-	-	-	-	-
Dysentery	19	25	15	25	4	4	24	20	41	32
Encephalitis	-	1	1	3	-	-	1	-	-	1
Meningitis	2	2	1	2	-	-	4	3	6	8
Measles	366	358	04	656	192	161	930	931	31	17
Ophthalmia Neonatorum	-	-	-	-	-	1	-	-	-	-
Paratyphoid Fever	-	1	-	-	-	-	-	-	2	13
Poliomylitis	-	-	-	-	-	-	-	-	-	-
Scarlet Fever	27	39	22	28	38	38	46	32	20	12
Smallpox	-	-	-	-	-	-	-	-	-	-
Typhoid Fever	-	2	-	-	-	-	1	-	-	-
Whooping Cough	76	60	22	34	84	111	26	35	9	9
Food Poisoning	11	4	-	1	3	6	4	8	4	4
*Infective Jaundice	?	?	?	?	?	?	28	50	63	57

\*Notifiable since 15th June, 1968.

Pneumonia not shown as it has not been notifiable since 1968.  
Certain diseases with nil return not shown.

## INFECTIOUS DISEASES

As far as infectious diseases were concerned, Birkenhead was a healthy town in 1969.

### DYSENTERY, FOOD POISONING, PARATYPHOID

There was a rise in the number of cases of dysentery, with two small outbreaks of dysentery in our day nurseries. Perhaps it is that we are looking for intestinal infections in the day nurseries, whereas we accept mild diarrhoea in the community. It is hard to believe there was no notified or confirmed case of food poisoning in the Borough in 1969 - our food handling is not that good - in fact in some shops we need improved standards of food care.

The importance of the food handler who is the carrier of a dangerous infection is shown in the cases of paratyphoid. Fortunately, those old people who returned from a Channel Island tour were mainly carrying the germ and had only mild, if any, symptoms. Further investigations showed that a cook at one hotel where they had stayed was also a carrier of the disease.

### MEASLES

How pleasing to have so few cases of measles. Is it measles vaccination, the biennial swing, or pure chance? It is difficult to say.

### INFECTIVE JAUNDICE

The number of cases - 63 males and 57 females - is interesting. This disease has been notifiable only since June, 1968, and it is too early to get the pattern of the disease. One small outbreak began in the middle of 1969 in a private day nursery. With the long incubation period of the disease, the occasional case was occurring in this nursery months later. In spite of good hygiene, it is difficult to stop the spread in a nursery or school once the virus has a firm hold.

### TUBERCULOSIS

#### NOTIFICATIONS

46 primary cases of tuberculosis were notified during 1969, as against 42 in 1968, an increase of 4 cases.

Of the 46 notified during 1969, 6 were notified by local Registrar and 2 by posthumous notification. In addition to the eight notified after death 3 others have since died as a result of the disease, and 2 have died from other causes. These figures show that, of the 46 primary cases of tuberculosis diagnosed during the year, 11 have died of the disease.

	<u>Primary Cases</u>	<u>Died During the Year</u>
Respiratory	38	7
Non-Respiratory	8	4

MORTALITY

A total of 33 patients died during the year, 20 patients died from tuberculosis and 13 from other causes. As stated above, 11 of the 20 cases who died during the year from tuberculosis were primary cases notified during 1969.

TUBERCULOSIS REGISTER

The Register shows a decrease of 4 during the year. 48 new cases were added to the Register, 46 being primary cases of tuberculosis and 2 transfers into the Borough. 52 cases were removed from the Register, 33 through death, 16 were recovered, and 3 left the Borough.

	Adults	Children (under 15 years)	Total
Respiratory - Male	332	12	344
- Female	250	21	271
Non-Respiratory - Male	22	1	23
- Female	45	6	51
Totals - Male	354	13	367
- Female	295	27	322
Grand Total - 1969	649	40	689
Grand Total - 1968	657	36	693

27 of the above patients were known to be sputum positive, 16 of this number being chronic cases of the disease.

In addition to the 689 patients whose names are on the Tuberculosis Register, 979 cases of quiescent tubercle attend the Clinics at Hamilton Square and Mill Lane - as follows :-

42, Hamilton Square	...	884
Mill Lane Hospital	...	95

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Examination of tuberculosis contacts is carried out by Dr. Merrin, Consultant Chest Physician, at the Chest Clinic, 42 Hamilton Square.

During the year 251 adults and 381 children attended for contact examination. Three children were found to have active tubercle and a further three children were given preventative chemotherapy.

Of the 381 children who attended - 26 children had a positive heaf reading, 18 were X-rayed only, 1 was examined only, 7 were positive following earlier B.C.G., 27 failed to attend for the heaf reading, and 203 children showed a negative reaction.

A total of 430 children received B.C.G. vaccination as follows :-

203 following negative heaf test

99 very young babies vaccinated without heaf test

128 child contacts vaccinated at birth in other hospitals

The ratio of contacts per notified case was 13.74.

In addition 14 student nurses were given B.C.G. vaccination.

### SOCIAL CARE

The Medical Social Worker has her office at the Chest Clinic, 42 Hamilton Square, where, during the year under review, 1,056 interviews were held. 980 visits were paid to patients at home or in hospital.

32 patients were referred to the Ministry of Social Security for Supplementary Benefit. Claims were made to the Pneumoconiosis and Byssinosis Benefit Board, or to the Ministry of Health and Social Security under the special provisions for persons suffering from these two industrial diseases, for 13 patients who were found to be suffering from pneumoconiosis. Financial relief for 2 families was obtained from the National Society for Cancer Relief.

The John Lloyd Corkhill Trust provided free milk for 18 patients; 16 cash grants were also made and 150 families received Christmas food parcels and toys. A loan of £180 was made by the Trust to a severely disabled patient, to enable him to buy a suitable vehicle for his work as a self-employed joiner.

22 families were referred for more suitable housing accommodation, 20 to the Birkenhead Housing Department and 2 to the Birkenhead Housing Aid Society. 6 families were re-housed by the Birkenhead Housing Department and one by the Birkenhead Housing Aid Society. One patient died.

Convalescence was arranged for 15 patients, of these 12 were paid for by the John Lloyd Corkhill Trust.

### OCCUPATIONAL THERAPY

11 patients attended daily at the Anne Glassey Workshop and home teaching continued for one session each week.

REHABILITATION

Of the 11 patients who attended the Workshop daily - 2 died during the year. One very severely disabled man, who had been supplied with equipment from the Workshop to enable him to work at home, also died. 2 patients left for outside employment.

19 patients were registered as Disabled Persons at the Ministry of Labour and Productivity, one young woman was trained as an Audio Typist.

SHELTERED WORKSHOPS

4 patients were employed under sheltered conditions at the Anne Glassey Workshop during the year.



PRIMARY NOTIFICATIONS OF NEW CASES OF TUBERCULOSIS

	Under 1	1- 1	2- 2	3- 3	4- 4	5- 5	10- 10	15- 15	20- 20	25- 25	35- 35	45- 45	55- 55	65- 65	75- 75	TOTAL
Respiratory, Males Females	- 1	- 2	- -	- -	- -	- -	- -	1 2	1 2	- 1	3 3	5 2	5 -	5 -	- -	22 11
Non-Respiratory, Males Females	- -	- -	- -	- -	- 1	- -	- -	- -	- 1	2 -	- -	- -	- -	- -	- 1	2 3
TOTAL:	1	- 2	- -	- -	1 -	- -	- 3	3 4	4 3	3 6	6 7	7 5	5 5	5 1	1 1	38
Death Returns from Local Registrars:																
Respiratory, Males Females	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	1 -	1 -	2 -	- -	4 -
Non-Respiratory, Males Females	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	1 -	1 -	2 -
Posthumous Notifications:																
Respiratory, Males Females	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	1 -	- -	1 -
Non-Respiratory, Males Females	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- 1
TOTAL:	-	- -	- -	- -	- -	- -	- -	- -	- -	- 1	1 1	1 1	1 4	4 1	1 1	8

TOTALS ... 46 in all

I am indebted to D.L. Caldwell, Esq., M.A , M.R.C.P., Consultant Chest Physician, for the following interesting article on respiratory disease :-

SOME REFLECTIONS ON THE CHANGING PATTERN OF  
RESPIRATORY DISEASE OVER THE PAST TWO DECADES

It is now just 20 years since I took up my clinical duties in the County Borough of Birkenhead, and this may prove a valuable occasion to take stock without necessarily being too statistical or scientific.

Twenty years ago pulmonary tuberculosis was a common disease particularly affecting young women and, although at that time anti-tuberculous drugs were being increasingly used, it was not until the mid-fifties that the value of long-term drug treatment given for a minimum period of two years began to be appreciated. Second line drugs then became increasingly available and it was found that less and less cases required the surgical treatment that had been widely practised in the early fifties. In 1970 it would be fair to say that any patient with pulmonary tuberculosis who does what he or she is told can now be cured of this disease. With the ready availability of chest X-ray examinations provided by the Mass X-ray Service, the painstaking X-ray examinations of members of tuberculous families and the effective treatment of cases discovered the mortality from the disease is negligible and its incidence very much reduced. The protective inoculation of harmless tuberculosis germs, known as B.C.G., given to members of tuberculous families who have not yet picked up the disease, and the availability of this inoculation to teenage school children (a protective measure not always accepted by the parents) has also been a contributory factor in the fall of cases of pulmonary tuberculosis especially among the young.

During the two decades, however, the incidence of lung cancer has increased, although the rising incidence is now beginning to level. Unfortunately, the results of treatment are now no better than they were 20 years ago with somewhere in the region of 5% survival of all cases five years after diagnosis. Over the past 20 years, it has been established by increasingly weighty evidence that cancer of the lung is very largely caused by tobacco smoking, especially the smoking of cigarettes. When the Medical Research Council brought out their report on smoking in 1962, a glorious opportunity was lost to change the smoking habits of the British public by putting a swingeing tax on cigarettes and reducing the tax on pipe tobacco and cigars. This could well have changed the habits of the British public in the same way as the terrific increase in the tax of Gin in the 18th century turned the British into a nation of beer-drinkers. It is significant that the only group of people in whom the incidence of cancer of the lung has fallen is in the medical profession, who have given up smoking to a far greater degree than any other section of the community. It is only by preventing adolescents from starting to smoke and by getting smokers to give up the habit in increasing numbers that the incidence of cancer of the lung in the town will fall.

The menace of chronic bronchitis is as high in Birkenhead as it is anywhere else in the world. The combination of climate, atmospheric pollution, spread of infection related to bad housing, and tobacco-smoking all produce this undesirable state.

Many men of the town over the past 20 years have had to face early retirement and early death due to this condition, but over the past five years or so the pattern of the disease is beginning to be less grim. The gradual cleaning up of the atmosphere, still painfully slow, is undoubtedly having its effect; and the prompt treatment by the general practitioners of the town given to patients suffering from the acute phase of the disease is also helping. Those patients who have been persuaded to give up smoking have undoubtedly reduced the severity of their disease and prolonged their lives. If the air of the town could be cleaned up more rapidly, and the people who have morning cough and expectoration would stop smoking, then the incidence and the severity of chronic bronchitis may well begin to diminish further. The improvement in housing conditions generally is also a factor and one would hope that in the next 10 years all the people of Birkenhead will no longer be living in sub-standard properties.

Asthma with its many-sided facets still continues to be a troubling disease and, although over the past 10 - 15 years Cortisone and its derivatives have certainly proved helpful, the management of patients on this treatment is not easy and there has been a rise in the death rate. However, a new treatment that has been available for the past three years has revolutionised the treatment of this condition, particularly in children. This treatment consists of the inhalation of a drug known as Disodium Cromoglycate in the form of powder which, if inhaled regularly over longer or shorter periods, suppresses the asthma and causes the attacks to be much less severe or even eliminates them completely in due course. Some few years ago, it was necessary for children who were severely disabled by asthma to have residential schooling, but now it looks as though with this treatment these children can now, in fact, be retained in their homes and are able to attend a normal school. To help both children and adults suffering from this disease, careful medical care by the family doctor and at hospital level is still needed.

Although for many years it has been known that asbestos, if inhaled in any significant quantities, gives rise to scarring of the lungs on which a cancer is liable to grow, it is only in the last decade that it has been discovered that exposure even to a fairly small quantity of asbestos in a sensitive individual will produce a malignant tumour of the pleura, the membrane which covers the lung, and for which so far there does not seem to be any cure; this condition is becoming somewhat more common, and I think it would be fair to say that I am seeing about one man every two months who may well be suffering from this disease. This condition particularly occurs in people who have been exposed to asbestos in the ship-yards and other industries using this material.

The workers of the town are not particularly afflicted by any other industrial diseases and with the change from silica to silicate in the manufacture of scouring products in 1965, the hazards of silicosis which occurred amongst the workers in the

early 60's have disappeared. Generally it can be said the industrial processes in which the workers from the town are engaged are pretty safe from the respiratory point of view.

In summary it can be said that in the two decades ahead good housing, clean air, diminution in the tobacco-smoking habit and more potent and effective drugs should all combine, not only to reduce still further the incidence of disabling respiratory disease, but might well eliminate it altogether. It seems unlikely that lung transplant surgery will be available for replacement of lungs worn out by age which should be the only remaining disabling condition.

### SPECIAL CLINIC

Dr. J.O. Doyle, Consultant Venereologist, St. James' Hospital, holds clinic sessions on the following days :-

Monday to Friday	...	2.00 p.m. to 6.00 p.m.
Wednesday	...	10.00 a.m. to 12.30 p.m.

Annual statistics are :-

<u>Year</u>	<u>Syphilis</u>	<u>Gonorrhoea</u>	<u>Others*</u>	<u>Total</u>
1965	15	124	501	640
1966	13	160	516	689
1967	24	140	549	713
1968	8	240	666	914
1969	13	290	780	1083

\* Includes some not needing treatment at the Centre

### VENEREAL DISEASE

The statistics show that over the past five years the incidence of syphilis has remained fairly static, but gonorrhoea shows an unfortunate rise, such that the number of cases has doubled since 1965. The column marked 'others' shows the incidence of non-venereal and non-specific urethritis has risen, but some of the increased number of patients attending the clinic came for investigation but did not require treatment.

Dr. Doyle, the Consultant Venereologist, is concerned about the rise in the number of cases of venereal disease. Dr. Fergusson, Health Education Officer, is linking with Dr. Doyle to get a publicity campaign in operation to increase public awareness of the dangers of this disease and point out the importance of early treatment.



ENVIRONMENTAL HYGIENEHEALTH Problems of Building Birkenhead Tunnel Fly-Over RoadsHOUSING

Inspection

Repair

Individual Unfit Houses

Clearance Areas

Rent Act

Improvement Grants

Houses in Multiple Occupation

ATMOSPHERIC POLLUTION

Smoke Control Areas

Industrial Premises

National Survey of Air Pollution

Offensive Trades

Noise Abatement

PEST CONTROL

Rats and Mice

Insects

Disinfection

OFFICES, SHOPS AND RAILWAY PREMISES

Inspection of Premises

Accident Notifications

Contraventions

Factories Act

FOOD AND DRUGS ADMINISTRATION

Milk Sampling

Ice Cream Sampling

Liquid Egg Sampling

Food and Drugs Sampling

Pesticides in food

Food Complaints

Food Hygiene

Food Condemnation



HEALTH PROBLEMS OF BUILDING  
BIRKENHEAD TUNNEL FLYOVER ROADS

As a newcomer arriving in Birkenhead for the first time in 1969 I was impressed by the major engineering feat of the construction of flyover roads at the entrance to the Birkenhead tunnel. In my first year as Medical Officer of Health it was soon apparent how this construction affected the health of the people of the town.

The disturbance to the people who lost their homes as a result of the flyover construction was an obvious upset. Those who had been used to living near the centre of the town, if a riverside town can be regarded as having a centre, were now rehoused in various new situations. A few remained in the central area, but some moved to the North and South and others moved further out to the peripheral areas of Woodchurch, Overchurch and Mount Estates. In all 208 house properties were demolished; 106 of these were actually Corporation properties, most of which had been built at the turn of the century for housing the artisan people. Included in the 208 properties were 11 Public Houses with living accommodation. In all 205 families were rehoused out of the 208 properties.

For some rehousing was a blessing as they were living in houses in multiple occupation. The older residents may have felt a little resentful of the move. The younger families welcomed the move to more modern accommodation, though the modern accommodation meant higher rents. Those rehoused in the peripheral estates had to cope with the difficulties of the omnibus transport to the town centre.

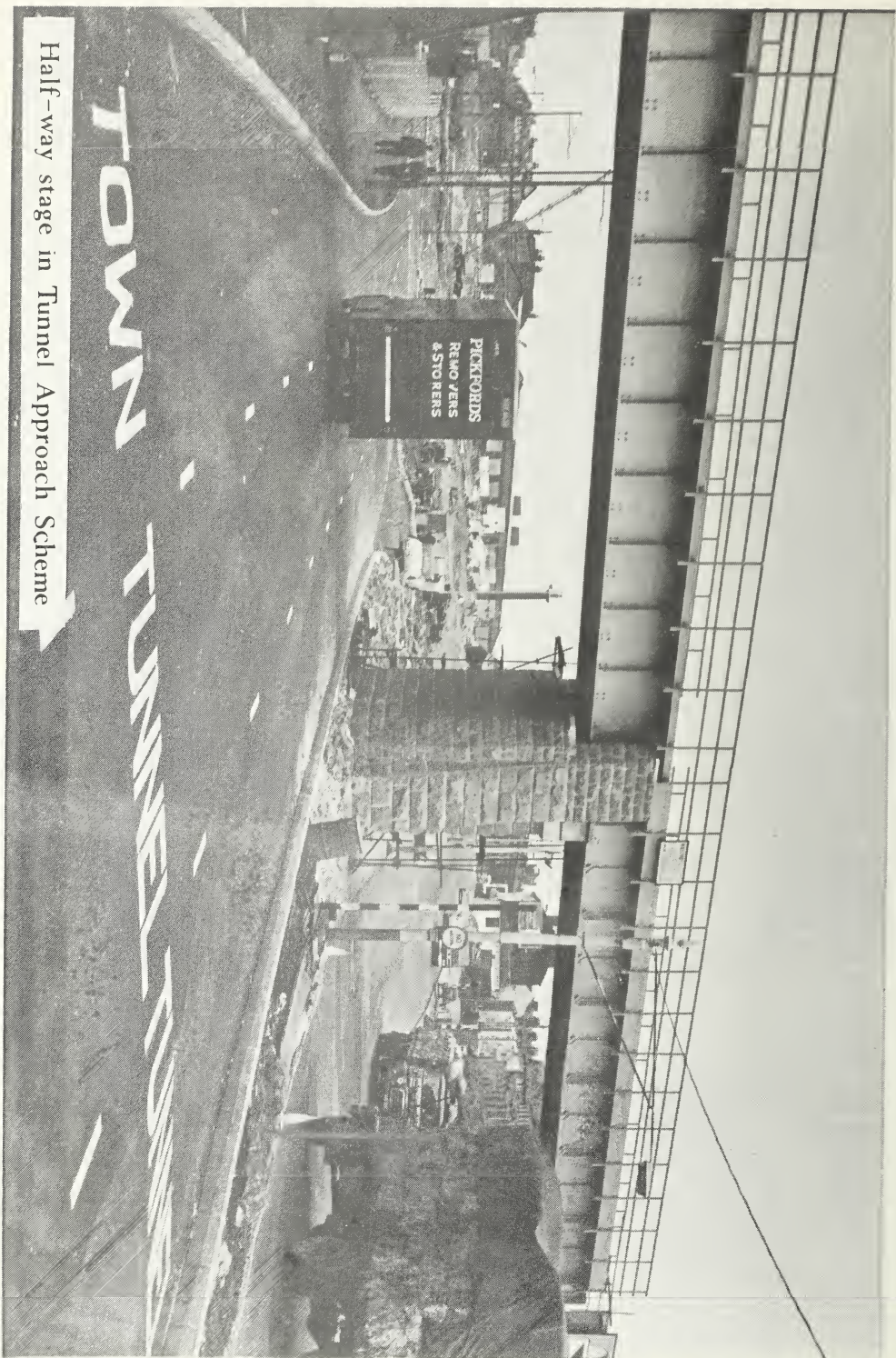
Housing difficulties were not confined to those families displaced from their homes by the flyover construction. In order to cope with their rehousing the slum clearance programme came to a standstill for nine months of the year. It was actually at a six months standstill in January, 1969. This period was to expire by March, 1969, but had to be extended to September of that year. Thus those who were waiting in the slum clearance areas were distressed about the delay. The morale of these families fell and the Medical Officer of Health was faced with numerous requests for rehousing on medical grounds. Where the health of small children, the elderly and infirm were concerned, priority for rehousing was often given. There was a very good relationship between the staff of the Health and Housing Departments, who tried very hard to rehouse people with impartiality. For the families with many children the Assistant Director of Housing was faced with the shortage of four bedroomed accommodation in some areas of the town and for the elderly and infirm with shortage of suitable ground floor accommodation. We even had to rehouse two blind people to a more settled area of the town as with the removal of bus stops they could no longer find their way.

Of course knocking down houses to build flyovers, as with similar demolition of houses in clearance areas, creates dust from bricks and smoke from burning wood. There is a general



Demolition in Commencement for Fly-Over





Half-way stage in Tunnel Approach Scheme

look of chaos which has a psychologically depressing effect on people. The opening of drains brings rodent problems. During the first six months of 1969 there were numerous pest complaints, some from the flyover area. There were few rodent operative staff to deal with these complaints. I recall that we had a meeting with Alderman Platt to discuss this staffing problem and it was agreed to recommend to the Council a revised pay and staffing structure for the pest and rodent operative team. How right that decision has proved, for by the time the flyovers are nearing completion we have a good team and all types of pest complaints are being dealt with satisfactorily.

Another public health hazard in any major building project in a town, and this was certainly noticeable in building the flyovers, was the constant noise from pneumatic drills. Masking the drills was suggested, although this reduced their efficiency.

In the midst of all this activity by workmen and the bustle of pedestrians, the traffic still had to enter the tunnel. Thanks to the police traffic jams were relatively few, but there must have been many a motorist with tense nerves as he entered the Birkenhead tunnel. I felt particular concern for the one or two families with young children who had to live in the shadow of the flyovers, a few still do, and their children who have to make their way to school through the traffic maze. As a parent I felt the worry and concern for these children.

At last in September, 1969, Alderman Platt performed one of his last duties to cut the tape to open the flyovers. The tunnel traffic was separated from the town traffic; half the traffic hazard was removed from the down town children who lived near the flyovers.

By the end of the year there was still much work to be done beneath the flyovers, but as the layout of roads and islands has become more established the dust has settled and Birkenhead has taken on a new look.

The Grange Road shopping precinct was planned by the end of 1969. There will be more development in the years to come, but eventually when the shopping area is built more and more cars will come off the flyovers and instead of rushing on to the Wirral will turn off to see the reconstructed, down town, Birkenhead.

Photographs 1 and 2 show the work of construction taking place on the flyovers.



## E N V I R O N M E N T A L   H Y G I E N E

(Report of the Chief Public Health  
Inspector - Mr. C. D. DARLEY).

### STAFF

The transfer from the grossly inadequate premises at 57, Hamilton Square to the new Social Services Centre in Cleveland Street took place quickly and smoothly, and it is to the credit of the staff that the services to the public from the environmental aspect did not suffer in any way.

The establishment of the Section at the end of 1969 was as follows:-

- 1 Chief Public Health Inspector
- 1 Deputy Chief Public Health Inspector
- 1 Specialist Food and Drugs Inspector
- 1 Specialist Smoke Control Inspector
- 1 Specialist Housing Inspector
- 7 District Inspectors (one vacancy)
- 1 Technical Assistant Office, Shops and Railway Premises  
Act
- 2 Technical Assistants Smoke Control Areas
- 4 Technical Assistants Pest Control
- 1 Trainee Public Health Inspector (two vacancies)
- 1 Senior Section Clerk
- 2 Assistant Section Clerks

Of the above staff, all of the District and Specialist Inspectors are fully trained Public Health Inspectors.

One District Public Health Inspector resigned to take up an appointment with another Authority and his place was filled by a Trainee Public Health Inspector on the staff who had qualified in July 1969.

The re-organisation which has taken place in the Section has led to a considerable increase in work by the Inspectors, although at times the resources were stretched to the limit.

The need for an efficient team of District Public Health Inspectors in a place like Birkenhead is obvious, and future planning may lead to the necessity of the establishment of trained Public Health Inspectors being increased still further. However, the provision of car allowances has helped improve the staff efficiency and mobility. The value of the Council's policy of training Public Health Inspectors cannot be over-estimated and speaks for itself, when one realises that no less than four of the District Public Health Inspectors on the staff



were trained within the Department.

Two trainee posts were vacant at the end of the year, but sending trainees to the Sandwich Course run in Liverpool will provide for better trained Public Health Inspectors. The duties of the Public Health Inspector have changed over the years so that he is now a highly qualified officer in local government service; similarly so has his appearance, and it is interesting to compare a photograph of a previous Public Health Inspector in Birkenhead just before the turn of the century with that of one of the more recently qualified inspectors.

### FUTURE PLANNING

At my first attendance to the Health Committee on 16th September 1969 I outlined steps that might be taken to increase the efficiency of the Section and lead to subsequent improvement in the environmental conditions in the Borough. Housing provided the greatest problem, but this will have to be viewed objectively as a long term project.

### PEST CONTROL

It appeared from preliminary investigations that Pest Control measures were proving to be totally inadequate, and without complete re-organisation of this work there would be little reduction in the number of infested premises. It was forecast that the situation might deteriorate still further.

### SMOKE CONTROL

This matter deserved the Council's consideration, and whilst only 28% of the Borough was subject to smoke control, I took the view that this might further be accelerated to bring nearly 60% of the Borough under smoke control within 3/4 years.

### FOOD HYGIENE

In relation to food hygiene, it was felt that the standards were not as high as they might be, and that whilst the Council's re-development project, which is so important, would eventually lead to improvement, nevertheless much would need to be done in relation to the older existing shops.

It is appreciated that any increases in services by the Council are bound to cost extra money, but the question of cost will be borne in mind at all times, and the Council's financial resources would not be over-burdened in one "fell swoop".

### INSPECTION AND REPAIR OF DWELLING HOUSES

The provisions of the Housing Act 1957 (Sections 9 and 10) were not invoked to effect the repair of housing during the course of the year. Instead Sections 39 and 93 of the Public Health Act 1936 and Section 52 of the Birkenhead Corporation Act 1954 were used to effect the repair of houses. These

Sections exist principally to overcome nuisance rather than to bring premises up to a full state of repair. In a town the size of Birkenhead with its major problem of housing ageing at a rapid rate (resulting from the boom type development of the down-town area little more than a century ago) it is essential for all the statutory provisions to be invoked to ensure that privately owned property is maintained in an efficient manner so as to prevent the necessity of the Council taking action in respect of unfit houses. In other words, it is better for the function of the Section to ensure that housing is maintained in a fit condition, and furthermore to ensure that property does not rapidly deteriorate.

Earlier Housing, Public Health and Rent Acts existed to ensure that housing was maintained in a reasonable manner, but this legislation did little to give property owners any incentive to keep houses in a good state of repair. The Housing Act 1969, however, does appear to give the owner of property the opportunity to obtain a greater rent in respect of a house in a good state of repair, whether with or without amenities, and it is hoped that this will assist in preventing the further deterioration of houses.

Not only is it the terrace type property that is in need of inspection to bring it up to a more reasonable standard of fitness, but so also are the multi-occupied large houses of the Borough which lack reasonable amenities for the tenants. Much of the down-town area of Birkenhead has gone beyond the stage of repair or improvement and can be dealt with only by demolition. Other classes of property, however, are very suitable for repair and improvement, and it is hoped that the Declaration of an Improvement Area in the Borough will encourage owners to apply for a grant to bring property up to a reasonable state of repair.

Number of inspections under the Public Health Act, etc.,	13,105
Number of re-inspections under the Public Health Act, etc.,	13,545
Number of informal notices served under the Public Health Act	1,816
Number of Statutory notices served under the Public Health Act	821
Number of Statutory notices served under the Birkenhead Corporation Act, 1954, Section 52	194
Number of Statutory notices served under the Birkenhead Corporation Act, 1954, Section 66	Nil
Average number of notices outstanding	800

Number of notices complied with during the year	1,798
Number of defects remedied during the year	4,033

Summary of Improvements effected :-

Roofs repaired	524
Chimney stacks repaired	64
Rainwater gutters repaired	391
Downspouts repaired	138
Walls pointed or repaired	231
Lighting or ventilation improved	13
Windows repaired	153
Window sash cords renewed	162
Firegrates repaired	23
Hearthstones repaired	-
Floors relaid or repaired	79
Skirting boards repaired	53
Wallplaster repaired	317
Ceiling plaster repaired	126
Doors repaired	139
Staircases repaired	11
Sinks renewed	8
Sink waste pipes trapped or repaired	70
Washing boilers repaired	26
Dampness remedied	445
Yard surfaces repaired or relaid	51
Yards drained	7
Sufficient water supply provided	99
Drains constructed, altered or repaired	76
Drains cleansed	383
Water closets repaired	164
Food stores provided	5
Tents, vans, sheds removed	4
Verminous persons/clothing/premises treated	46
Miscellaneous	199

## LEGAL PROCEEDINGS

Legal proceedings were instituted under Section 94 Public Health Act 1936 in 19 cases where owners had failed to comply with the requirements of Abatement Notices. Fines were imposed in five cases and totalled £25. 0.0. Fees of £3. 3. 0. were awarded in one case. Nuisance Orders were made in 13 cases when the work was not completed at the date of the hearing.

### Work done by Local Authority in default of owners

The Local Authority cleansed obstructed drains at 80 houses where owners had failed to comply with 48 hour notices under the provisions of Section 52 Birkenhead Corporation Act 1954. At the request of owners, drains were cleansed at a further 48 houses.

Various items of repair were executed at 5 houses, in four cases by agreement and in the other case following a Nuisance Order made by the Magistrates.

The costs of the above work are recoverable from the owners. During the year accounts rendered totalled £451.19.11.

## HOUSING ACT, 1957. Secs: 17 and 18

### Dwelling houses unfit for human habitation

33 houses or parts of buildings used as dwellings were reported to the Health Committee as being unfit for human habitation and not capable of being rendered so fit at reasonable expense.

During the year the Council made the following Orders :-

Demolition Orders in respect of 5 dwellings.

Closing Orders in respect of 10 dwellings and 6 parts of buildings.

### Demolition and Closing of Unfit Dwellings

17 unfit houses, not in Clearance Areas, were demolished during the year and, following the re-housing of the occupants, 24 dwellings were closed.

29 families comprising 117 persons were re-housed from dwellings subject to demolition or closing orders.



HOUSING ACT 1957. Sec. 42Clearance Areas

The Medical Officer of Health represented the undermentioned areas and the Council declared them to be "Clearance Areas."

Area	No. of dwellings	No. of families	No. of persons
Pensby Street Clearance Area	31	31	116
Warwick Street Clearance Area	79	92	293
	110	123	409

During the year the Minister of Housing and Local Government confirmed the Orders made in respect of the undermentioned areas :-

	No. of dwelling houses	Properties Upgraded as "Not unfit"	Well maintained payments
Myrtle Place Clearance Area Compulsory Purchase Order 1968	102	2	32
Thomas Street Nos: 1, 2 and 3 Clearance Areas Compulsory Purchase Order 1968	32	1	8
Walton Street Clearance Area Compulsory Purchase Order 1968	4	-	-
Field Street Nos: 1, 2 and 3 Clearance Areas Compulsory Purchase Order 1969	131	1	20
	269	4	60

Rent Act 1957

Once again I have to report that little use has been made of this Act during the past year.

Formal details of the applications made for the issue and cancellation of certificates are set out below:-

PART 1 - Applications for Certificates of Disrepair

1.)	Number of applications for certificates	Nil
2.)	Number of decisions not to issue certificates	Nil
3.)	Number of decisions to issue certificates	
	(a) in respect of some but not all defects	Nil
	(b) in respect of all defects	-
4.)	Number of undertakings given by landlords under paragraph 5 of the First Schedule	Nil
5.)	Number of undertakings refused by the Local Authority under the proviso to paragraph 5 of the First Schedule	Nil
6.)	Number of certificates issued	Nil

PART 2 - Applications for Cancellation of Certificates

7.)	Applications by landlords for cancellation of certificates of disrepair	1
8.)	Objections by tenants to cancellation of certificates	Nil
9.)	Decisions by Local Authority to cancel in spite of objection by tenant	Nil
10.)	Certificates cancelled by Local Authority	1

Rent Act 1965. Part III

The Chief Public Health Inspector is the officer authorised to deal with complaints of harassment and/or illegal eviction and to institute legal proceedings where necessary.

19 complaints of harassment in respect of 14 premises were investigated. 6 of these concerned the withdrawal of essential services, chiefly the cutting off of supplies of gas or electricity together with threatened eviction. In nine cases attempts at unlawful eviction were alleged, and in the remaining cases other forms of harassment were cited. The landlords were interviewed or letters were sent and the cases were settled without court action. In one case harassment was not confirmed. A case of actual illegal eviction resulted in Court proceedings and the landlord was fined £20.0.0.

HOUSE PURCHASE AND HOUSING ACT 1959Standard Grants

127 applications for standard grants were dealt with during the year. 21 of these were in respect of tenanted houses and 106 were from owner/occupiers.

122 of the applications were approved and 5 refused.

The grounds for refusal were that alterations to the structure were required, which would be better dealt with under a discretionary grant, or the amenities applied for already existed, or the property had not a "life" of 15 years.

The number of dwellings improved during the year amounted to 59 and the amenities provided were :-

42	fixed	baths
45	wash-hand	basins
42	hot water	supplies over baths
44	"	" " " " wash-hand basins
33	"	" " " " sinks
61	water	closets within the house
41	food	stores

The total grant paid amounted to £6,007.18.10. averaging £101.16.7. per house against an average last year of £115.9.8.

Discretionary Grants

40 premises were surveyed following applications for discretionary improvement grants.

Houses in Multiple Occupation

The examination of the register of electors shows there to be no less than 3189 houses in the Borough in which more than one family name appears. The fact that different names exist in a house does not necessarily mean that the house is a house in multiple occupation - in all probability it relates to parents having married children living with them or to there having been children of a second marriage or to children caring for their older relatives. However, my inspection of the large type property in the Borough which is suitable for use as houses in multiple occupation, leads me to believe that no less than 20% of the 3189 will come within the definition of a house in multiple occupation. Whilst some of these houses may be of a relatively high standard and be provided with all amenities, no doubt a number will not and these are the ones to which special attention must be paid. It is hoped that in the ensuing year a large number of these houses will be inspected in order to ensure that the standards of amenities laid down by the Council are maintained.

The following details relate to action taken in respect of houses in multiple occupation in 1969.

8 houses were surveyed during the year. These contained 27 separate lettings and housed 79 persons.

1 house has been closed as unfit for habitation and 3 are no longer in multiple occupation. These houses had originally contained 17 separate lettings and housed 44 persons.

The population of 40 houses which were known to be in multiple occupation at the beginning of the year contained 146 separate lettings and accommodated 383 persons of all ages.

Overcrowding of individual lettings is not a serious problem.

### COMMON LODGING HOUSES

During the course of the year 21 visits were paid to the two Common Lodging Houses in the Borough. Whilst one of the Common Lodging Houses was operating in a satisfactory manner the other was subject to a number of adverse reports as a result of which the Council decided that the keeper's registration should be cancelled with effect from 31st December, 1969.

### ATMOSPHERIC POLLUTION

#### Smoke Control Areas

The following table gives details of the Smoke Control Orders in operation. The No. 10 Nocturnum Area was confirmed by the Minister and comes into operation on 1st July 1970.

A survey on the No. 7 Oxton Area commenced during the year.

The construction of new buildings adds to the number of dwellings within the areas and at the end of 1969 there were 12,729 premises in smoke control areas. This comprises 29.5% of the total in the Borough. The area controlled covers 2,395 acres, or approximately 27.7% of the Borough's acreage.



Details of Orders made are as follows:-

<u>Area</u>	<u>No. of Acres</u>	<u>No. of buildings at date of Order</u>	<u>No. of premises at 31.12.69.</u>	<u>Made</u>	<u>Confirmed</u>	<u>Order</u>	<u>Operative</u>
1. Woodchurch	394	3002	4424	8.2.61.	13.7.61		1. 7.62
2. Bidston	386	719	719	23.3.62	31.5.62		1. 7.62
3. St. James	196	1907	1931	21.2.63	21.5.63		1. 7.64
13. Fender Valley	418	55	777	11.11.64	8.7.65		1. 7.66
14. Ford	174	2	562	11.11.64	8.7.65		1. 7.66
4. Claughton	277	2922	2975	21.10.65	25.3.66		1. 7.67
5. Upton	281	1071	1134	25. 8.66	6.1.67		1.10.67
6. Bidston Hill	269	181	207	25.10.67	24.1.68		1. 8.68
	<u>2395</u>	<u>9859</u>	<u>12729</u>				
10. Noctorum	371	1024	1024	15. 1.69	10.7.69		1. 7.70
Future Areas in the planned programme are:-							
<u>No.</u>	<u>Area</u>						
8	Saughall Massie						
9	Thingwall						
7	Oxtown						
15	Birkenhead Park						
16	Swan Hill						

Routine smoke observations are made from time to time in relation to industrial premises. When contraventions of the Dark Smoke (Permitted Periods) Regulations are noted, a visit and inspection of the plant is carried out to determine the cause, and prevent a recurrence.

Industrialists are encouraged to submit applications for prior approval of new furnaces but it is unfortunate that so few take the opportunity to adopt this safeguard. However, the local authority's right is statutory in respect of chimney heights and industrialists may be required to construct chimneys of such height as to prevent nuisance to the residents in close proximity to the plant. Many complaints of such nuisance are associated with scrapyards and demolition contractors. The former sometimes involves co-operation with the Alkali Inspectorate, depending upon what is being burnt, but the emission of smoke is always investigated by the staff of the section.

#### CLEAN AIR ACTS, 1956 & 1968

No. of complaints received	29
No. of observations of factory chimneys	19
No. of contraventions recorded	6
No. of prosecutions	1
No. of visits to factories	24

#### CLEAN AIR ACTS, 1956 & 1968

Notification of installation of furnaces (Section 3)	9
Prior approval of new furnace installation (Section 3)	Nil
New chimney heights approved (Section 6)	6

#### NATIONAL SURVEY OF AIR POLLUTION

The four stations have been in operation since December 1961.

The survey gives a daily record of the amount of smoke and sulphur dioxide present in the air in the vicinity of each station, viz:-

- 1) Tranmere Abattoir - an industrial area
- 2) Central Library - a densely built-up residential area
- 3) Water Tower, Hill Road - a lightly built-up residential area

- 4) Woodchurch Estate - a smoke control area

#### OFFENSIVE TRADES

One application for the establishment of a new trade (soap making) was granted.

6 visits of inspection were made.

#### NOISE ABATEMENT

Complaints regarding 12 alleged noise nuisances were made during the year. One nuisance was not confirmed. Five concerned the use of un-muffled pneumatic drills. The attention of all statutory undertakers and main contractors, carrying out major works in the Borough, was drawn to the necessity to provide this type of equipment with suitable mufflers. Despite this, further incidents occurred and although I have now received assurances from the persons concerned, the position is being watched closely.

Two complaints referred to noise from Launderettes. One was due to a defect in the machinery which was remedied but in the other case, additional sound-proofing and insulation were required.

Nuisance from the "sand-blasting" method of cleaning buildings was reduced by the substitution of the "discing" process.

Nuisance from ventilating fans on multi-storey flats occurred and over-hauling of the apparatus minimised the noise.

The burglar alarms were set off on ten occasions within two months at the same premises and complaint was made about the undue delay in switching off the detector during the night. Over-hauling of the apparatus and the co-operation of the police produced an improvement.

Complaint continues to be made, from time to time, regarding noise from an iron-ore jetty on the Dock Estate. The work usually continues day and night until the ship is discharged and the nature of the cargo is such that little can be done to prevent nuisance.

In all 55 visits were made in connection with these complaints.

#### CARAVANS

There were no applications to place caravans on land within the Borough.

Groups of "travellers" parked their caravans and lorries varying from 4 to 12 in number, on various sites within the Borough. As they have no water supply, sanitary accommodation or means of refuse disposal, the sites soon become a danger to health to the very deep concern and dismay of local residents.

30 visits were paid to these sites.

#### THE BIRKENHEAD CORPORATION ACT 1954

##### Register of Barbers and Hairdressers

New registrations during the year	11
Number on register at end of year	190
Number of visits to hairdresser's premises	37

#### EXTERMINATION OF PESTS

##### Rats and Mice

- (a) In sewers During the course of the year sewer treatment was carried out using 3% Fluoracetamide. As a result of the more regular treatment of the sewers that took place during the year, in due course, a beneficial effect should be felt by reducing the number of infested premises.

(b) In surface premises

No. of premises inspected by rodent operator	1431
No. of premises found to be infested with rats or mice	1096
No. of treatments by rodent operator	1085
Total number of visits by rodent operator	3423
Total number of visits by Public Health Inspectors	1581

##### Insect Pests

No. of houses and other premises involved	157
No. of rooms treated	591
Verminous articles treated	2
Wasps nests destroyed	8
Verminous persons cleansed	3

A nominal charge is made for this work.



38 occupiers of 40 premises retain the services of the rodent operator to make regular visits to their premises throughout the year to keep them free from rats, mice and insect pests.

Treatments were carried out to deal with infestations of bugs, fleas, ants, cockroaches, larder beetles, spider beetles, moths, mites, silverfish, blue bottles, etc.

### Disinfection

The contents of one house were disinfected.

2 bundles of clothing were disinfected.

During the year 1969 the Health Committee agreed to the re-structuring of the staff in the Pest Control Section as a result of which Mr. J.E. Glover was appointed. Towards the end of the year one of the rodent operatives, who had been on the staff for some time, left and two further appointments were made. As a result of these appointments and the re-organisation of the section it is expected that the Council's pest problem will be reduced considerably. It should be made clear, however, that as a result of the improvement of the service, it is quite likely over the next two years that more complaints will be received. In due course however, the numbers of rats and mice inhabiting the Borough will be reduced.

### BIRKENHEAD CORPORATION ACT 1881. Section 90 - PIG-KEEPING

There were no new applications for permission to keep pigs.

Three pig keepers ceased to keep pigs during the year.

There are now 7 pig-keepers in the Borough.

### PHARMACY AND POISONS ACT 1933

The department is responsible for the issue of licences to persons, other than pharmacists, who sell by retail those poisons set out in Part II of the Poisons List.

New licences issued during the year	3
Licences renewed during the year	97
Change of address	Nil
Number of visits to shops	112
Number of licences deleted	1

### THE RAG FLOCK AND OTHER FILLING MATERIALS ACT 1951

In accordance with the provisions of the above Act the undermentioned premises have been included in the Statutory Register.

Premises licensed for the manufacture and storage of Rag Flock	Nil
--	-----

Premises registered for the manufacture of  
new upholstery

3

No samples were taken during the year.

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963ANNUAL REPORT OF THE LOCAL AUTHORITY ON THEIR PROCEEDINGS UNDER THE ACT

Prescribed particulars to be included in the annual report to the Minister of Labour by Local Authorities under Section 60.

TABLE A - REGISTRATIONS AND GENERAL INSPECTIONS

Period covered - 1st January to 31st  
December 1969.

Class of premises	Number of premises newly registered during the year	Total number of registered premises at end of year	Number of registered premises receiving one or more general inspections during the year
(1)	(2)	(3)	(4)
Offices	34	340	281
Retail Shops	50	768	458
Wholesale shops warehouses	4	42	54
Catering establishments open to the public, canteens	3	157	148
Fuel storage depots	-	3	-
TOTALS	91	1310	941

TABLE B - Number of visits of all kinds by Inspectors to registered premises = 1262.

TABLE                      ANALYSIS BY WORKPLACE OF PERSONS EMPLOYED IN  
REGISTERED PREMISES AT END OF YEAR

Class of workplace (1)	Number of persons employed (2)
Offices	3556
Retail shops	3883
Wholesale departments, warehouses	384
Catering establishments open to the public	1610
Canteens	95
Fuel storage depots	12
TOTAL	9540

Total Males                      3145

Total Females                      6395

Total                      9540

TABLE D - EXEMPTIONS    ...    ...    ...    ...    NIL

TABLE E - PROSECUTIONS ...    ...    ...    ...    NIL

TABLE F - STAFF

No. of inspectors  
appointed under section  
52 (1) or (5) of the Act    13    (only one  
inspector is  
employed full  
time on this work

No. of other staff employed  
for most of their time on  
work in connection with the  
Act                      NIL



## REGISTRATIONS

91 premises were registered during the year, 24 of which were registered only after personal contact had been made and Form O.S.R.1. delivered to the employers. As a result of re-development, road improvement works, slum clearance and premises ceasing to employ staff, 119 premises were removed from the register. In order to maintain the register accurately, it is necessary to carry out regular street by street surveys. Experience has shown that approximately 95% of the large employing establishments are aware of the requirement to register the premises, whilst the remainder either neglect or are unaware of their responsibilities in this matter. The closure of premises, change of ownership and cessation of employment of staff is not notifiable: consequently this information can only be obtained by visiting the premises.

Since the Offices, Shops and Railway Premises Act came into operation, 1941 registration forms (O.S.R.1) have been received of which 1310 relate to premises still on the register. The changes result from the closure of premises, change of ownership, change of business, transfer of responsibilities to H.M. Factory Inspectorate and the discontinuance of the employment of staff.

2882 general inspections have been made since the Act came into operation. Contraventions found on inspection have generally been remedied following informal action, although in isolated cases it has been necessary to remind employers that contraventions could lead to the institution of legal proceedings.

Since the introduction of "The Information for Employees Regulations" 1965, both employers and employees have been made more conscious of the requirements of the Act. It is considered that the majority of employers now look upon the inspector as an advisor to assist them in conforming with regulations, rather than as a person whose sole duty is to serve notices and threaten legal proceedings. This has resulted in the full co-operation of employers and the necessary work being carried out both expeditiously and satisfactorily.

During the year under review one complaint was received from a member of the public. It was alleged that a child was burned by a gas heater unit which stood in the sales area of a shop. On investigation it was discovered that, although the cover of the heater was hot to the touch, it was not sufficiently hot to cause a person to burn themselves unless they were in direct contact with the heater for several seconds. The proprietor agreed to fit a safety guard in the form of a wire mesh screen to prevent direct contact with the heater. This has now been satisfactorily carried out and shows the degree of co-operation existing between employers and the department.

In several cases relating to older types of buildings, employers have installed within the main buildings, water closet accommodation and washing facilities, in order to improve the standard of amenities. It has often been found however that the original water closet accommodation is no longer in use; as a result it is forgotten and is not maintained. These instances have been brought to the notice of owners, who have agreed to seal them off at the main drain in order to prevent offensive smells, and eliminating the risk of ingress and egress by rats.

Facilities for the eating of meals (Section 15) applies only to "Shop Premises". I am of the opinion that the section should be amended to include office type premises into which the public resort. It is all too common to find employees in betting offices, estate agents and insurance offices eating packed meals without any privacy whatever.

### ACCIDENTS

63 accidents were reported, of which 27 required investigation. There were no fatal accidents.

Most accident reports related to falls at the same level. Women, it was found, were more prone to this type of accident than men and I cannot help wondering to what extent unsuitable footwear was to blame. It was necessary to make recommendations for the prevention of accidents in respect of 10 cases, which resulted in modification of machinery plant, electrical switch-gear and fitting of guards. Furthermore, advice was given on plant operation and practices.

The accidents reported relate to 0.66% of staff employed in "sedentary" work. How this compares with the national figures of accidents affecting all employed workers I do not know but I would suggest that the figure in this area, as in others, is low, probably because employers do not notify the authority of accidents involving an employee having more than three days absence from work.

Further co-operation is needed between local and central government departments in order that claims for "industrial injury" benefit might be related to accident reports. It is hoped that employers will continue to co-operate to the extent of permitting the "authorised officer" of the Local Authority to examine the accident report book, although it appears that it is necessary to be kept only at the places where ten or more people are employed.

The co-operation of occupiers of premises registered under the Offices, Shops and Railway Premises Act 1963 is greatly appreciated.

### CONTRAVENTIONS

778 contraventions were brought to the attention of occupiers of registered premises.

Summary of Contraventions

Section	4	Cleanliness	125
"	5	Overcrowding	3
"	6	Temperature	51
"	7	Ventilation	21
"	8	Lighting	62
"	9	Sanitary Conveniences	122
"	10	Washing facilities	88
"	15	Eating facilities	8
"	16	Floors, passages and stairs	118
"	17	Guarding of machinery	5
"	24	First Aid	86
"	50	Information to employees	89
			—
Total			778
			==

FACTORIES ACT, 1961Prescribed Particulars on the Administration of the  
Factories Act, 1961PART 1 OF THE ACT

1. INSPECTIONS for purposes of provisions as to health  
(including inspections made by Public Health Inspectors)

Premises  (1)	Number on Register  (2)	Number of		
		Inspections  (3)	Written Notices  (4)	Occupiers prosecuted  (5)
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	20	16	-	-
(ii) Factories not included in (1) in which Section 7 is enforced by the Local Authority	381	147	19	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	42	28	1	-
TOTAL	443	191	20	-



## 2. Cases in which DEFECTS were found.

Particulars  (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found  (2)	Remedied  (3)	Referred		
			to H.M. Inspector  (4)	by H.M. Inspector  (5)	
Want of cleanliness (S.1.)	-	-	-	-	-
Overcrowding (S.2.)	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4.)	-	-	-	-	-
Ineffective drainage of floors (S.6.)	-	-	-	-	-
Sanitary conveniences (S.7.)	-	-	-	-	-
(a) Insufficient	1	2	-	1	-
(b) Unsuitable or defective	17	19	-	3	-
(c) Not separate for sexes	1	1	-	1	-
Other offences against the Act (not including offences relating to Out-work)	-	-	-	-	-
Total	19	22	-	5	-

PART VIII OF THE ACT

## Outwork

(Sections 133 and 134)

Nature of work  (1)	Section 133			Section 134		
	No. of out-workers in August list required by Sec: 133(1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in un-whole-some premises	Notices served	Prosecutions
	(2)	(3)	(4)	(5)	(6)	(7)
Wearing Apparel } Making etc., 22 } Cleaning and } Washing		-	-	-	-	-
TOTAL	22	-	-	-	-	-

MILK SUPPLY

The arrangements for processing and distributing milk in the Borough continue to be satisfactory. Supervision and control by sampling are carried out mainly at the two processing dairies, where over 30,000 gallons of milk are pasteurised and bottled or cartoned each day.

The numbers of registered dairies and dairymen and of licences issued under the Milk (Special Designation) Regulations are :-

No. of registered dairies	29
No. of registered dairymen	244

Dealers licensed to sell prepacked milk	241
Processor's licences to pasteurise milk	2
Number of visits to dairymen's premises	155

### Bacteriological Examination of Milk

Samples were submitted with the following results:-

	<u>Passed</u>	<u>Failed</u>	<u>Total</u>
Pasteurised Milk	167	-	167
Sterilised Milk	37	1	38
Ultra High Temperature Milk	8	-	8
Untreated Milk	17	2	19
	229	3	232

Two of the failures were in respect of the methylene blue test in samples taken from vending machines. One sample of Sterilised Milk failed the turbidity test.

### Examination for Brucella Abortus etc.

The untreated milk sold in Birkenhead is bottled on farms situated within the area of other local authorities. Regular samples are taken of this milk and in the event of positive samples, the Medical Officer of Health of the district concerned is notified.

No. of samples of milk examined	-	17
No. of positive samples found	-	Nil

These 17 samples were also examined by guinea-pig inoculation for T.B. No evidence of T.B. was reported.

### Chemical Analysis of Milk

All milk for the two pasteurising dairies arrives in tankers, each containing the bulked milk from several farms. Samples taken after processing are of a satisfactory standard, as is the farm bottled milk from Channel Island herds.

127 samples were submitted for analysis.

One sample of untreated milk was found to be deficient in fat. A warning was given to the producer.

ICE CREAM

Details of the premises retained on the statutory register are as follows:-

Manufacture of Pasteurised Ice Cream	14
Manufacture of Cold Mix Ice Cream	12
Manufacture of Lolly Ices only	7
Sale of Ice Cream and/or Lolly Ices	579
No. of visits to premises	133

80 samples of Ice Cream and 9 samples of Lolly Ices were submitted for Bacteriological examination during the year and reported upon as follows:-

Samples of Ice Cream placed in Grade I	33
" " " " " " " II	22
" " " " " " " III	16
" " " " " " " IV	9
	<hr/>
	80
	<hr/>

The Lolly Ice samples were satisfactory.

In addition, 18 samples of Ice Cream were submitted for Chemical Analysis, with satisfactory results.

Ice Cream is not now manufactured at many of the premises registered for that purpose. The majority of the above samples were taken from the manufacturers still operating.

LIQUID EGG (PASTEURISATION) REGULATIONS, 1963.

1) No. of Egg pasteurising plants	None
2) No. of samples taken	10

All samples passed the Alpha Amylase test.

No problems have arisen in the administration of these Regulations.

WATER SUPPLY

During the year, 21 samples of Drinking Water were taken from various points within the Borough for Bacteriological examination.

All samples were satisfactory.



PUBLIC SWIMMING BATHS

Fifty two samples of water from the 3 public swimming baths in the Borough were taken for Bacteriological examination.

One sample was reported to contain more than 300 bacteria per ml.

No B. Coli or Coliform organisms were present.

This I believe to be an excellent record and credit is due to the Baths Manager and his staff.

FOOD AND DRUGS ACT, 1955Analysis of Food (other than Milk)

A wide variety of foods and drugs were sampled during the year. A total of 239 samples (in addition to the 127 milk samples previously mentioned) were submitted to the Public Analyst, Tennyson Harris Esq., Ph.C., F.P.S., F.R.I.C., at Manchester, whose help and co-operation are gratefully acknowledged.

The following samples were reported to be unsatisfactory:-

French Brandy	- Deficient in Higher Alcohol
Steak and Kidney Pies	- 2 samples deficient of kidney
Salad Cream	- fat content becoming rancid
Sliced Beetroot	- a prepacked food without a declaration on the label
Stewed Steak with gravy	- slightly deficient in meat content
Pork Sausages	- slightly deficient in meat content
Fruit Drink	- 2 samples deficient in fruit juice
Fish Cake	- deficient in fish

Legal proceedings were instituted in respect of the French Brandy, but the case was dismissed. Warnings were given in respect of the other samples and where appropriate, stocks were withdrawn from sale.

In 11 of the complaints from members of the public mentioned later, the food or foreign object was sent to the Public Analyst for examination.

Pesticidal Residues in Foodstuffs

This authority participated in the National Investigation into Pesticide Residues in Food which ceased on 31st March, 1969.

A total of 9 samples were taken and Pesticidal residue found in the following food:-

Canary Tomatoes - Lindane 0.05 p.p.m.

### Food Complaints

Seventy-seven complaints were received during the year regarding food alleged to be unfit for consumption. All complaints were investigated with the retailers, manufacturers or importers concerned. However, in some cases it was difficult to establish whether the food was in the alleged condition at the time of sale.

Foreign objects were responsible for 36 of these complaints, food affected by mould for 23 complaints, dirty milk bottles for 5 complaints and unsound food for 13 complaints.

From the varieties of foods, bread and confectionery caused 26 complaints; meat and meat products 34 complaints; milk and dairy products 12 complaints; while there were 5 complaints about miscellaneous foodstuffs.

Some complaints, often received several days after purchase, are brought by people who believe that subsequent proceedings or other action by this Department will automatically enable them to get their money back, or even receive some form of compensation. However, even if proceedings are brought under the Food and Drugs Act, and the case proceeds, the complainant will only receive expenses for attending the court and has the necessity of taking civil action in another court with regard to his own personal redress. This position is always explained to complainants, but their re-action is not always favourable. As the Department has to rely on the public's sense of duty in bringing forward these complaints, it may be thought desirable that their interests should be more completely protected than at present.

Legal proceedings under Sections 2 and 8 of the Food and Drugs Act, 1955, were instituted in the following cases :-

A cigarette end in a fish cake	-	fine of £20
A mouldy meat pie	-	fine of £20 and £5. 5. 0. advocates fee.
A cigarette end in a meat pie	-	case dismissed.

### FOOD HYGIENE

This work is carried out by a Food Inspector and six district inspectors, there being no specialist Food Hygiene inspector. Some 2342 visits were paid during the year to shops and other food premises of all types.

During visits, inspectors point out to shop assistants and managements the importance of personal hygiene, cleanliness of premises, proper storage and rotation of stock, adequate refuse disposal, correct use of refrigerators.

No legal proceedings were instituted under the Food Hygiene Regulations during the year.

The following premises are registered under the provisions laid down in Section 16 of the Food and Drugs Act, 1955.

Fish fryers	97
Fish fryers and chicken roasters	9
Butchers manufacturing sausages	55
Butchers manufacturing sausages and cooked meats	40
Ham boiling	1
Grocers manufacturing cooked meats	7
Pickle manufacturers	2
Chicken roasters	15
Meat products factories	2
	<hr/>
	228
	<hr/>

Premises registered under the provisions laid down in the Birkenhead Corporation Act 1954:-

Notification of new food premises	(Sec:101)	2
Food hawkers and their premises	(Sec:102)	9
Vendors of shell fish and their premises	(Sec:103)	1

During the year 473 written notices and 43 verbal notices were given under the Food Hygiene Regulations, covering 1756 separate items.

Summary of Inspections and Defects remediedFood Hygiene (General) Regulations 1960

	Shops	Cafes	Food Preparing Premises	Licensed Premises	Mobile Shops and Stalls
Number of premises	688	104	162	177	182
Fitted to comply with Reg: 16	688	104	162	177	168
Premises to which Reg.19 applies	654	104	162	177	73
Premises fitted to comply with Reg:19	654	104	162	177	73



	Shops	Cafes Canteens	Food Preparing Premises	Licensed Premises	Stalls and Mobile Shops	Totals
Number of premises	688	104	162	177	182	1313
Number of inspections	1416	125	170	139	168	2018
<u>Defects and Contraventions remedied</u>						
Walls, floors, ceilings, doors, windows						
(a) repaired	24	3	7	6	-	40
(b) cleansed	25	4	8	6	4	47
Food rooms ventilated	5	1	-	-	-	6
Accumulations of refuse removed	16	4	5	1	1	27
Cleanliness of persons, utensils, clothing	18	-	1	-	2	21
Wash-basins provided	5	-	2	-	2	9
Sinks provided, renewed	7	-	2	1	1	11
Hot and cold water supply	14	-	3	-	3	20
Towels, soap, etc., provided	4	2	2	2	3	13
Protection from contamination of food	20	1	2	1	10	34
Clothing accommodation provided	6	2	-	-	-	8
Lighting provided in sanitary conveniences	4	-	-	-	-	4
	148	17	32	17	26	240

105

### Poultry Inspection

There are no poultry processing premises within the Borough.

Unsound Food

The inspection of food in shops, warehouses, canteens, etc., was carried out by all the public health inspectors. All condemned food was disposed of - mainly by tipping on the Corporation tip - under supervision. The following list shows the types and quantities of food dealt with.

## Canned and Bottled Goods:-

Meat	1472
Fruit and Vegetables	13,541
Fish	436
Soup	149
Milk	75 and 185 pints
Preserves	18
Puddings	844
Bacon	14 lbs
Boneless Beef Flanks	120 lbs
Beef	497 lbs
Bovril	1 jar
Butter	191 lbs
Cheese	76 lbs
Cheese	82 boxes
Cheese Powder	224 lbs
Chicken	28 lbs
Chickens	105
Chicken sandwiches	8
Chicken and Ham roll	2 $\frac{1}{4}$ lbs
Cornish Pasties	72 pkts
Cod	53 lbs
Carcase meat and offal	484 lbs
Cornflour	7 lbs
Cream	7 lbs
Crisps	48 doz. packets
Dripping	40 lbs
Frozen Foods	18,430 pkts
Ginger Beer	12 cans
Ham	6 $\frac{3}{4}$ lbs
Ice Cream	41 pkts
Juice	19 $\frac{1}{2}$ lbs

Liver	18 lbs
Lamb	172 lbs
Kippers	12 lbs
Meat Pies	4 lbs
Pork	79 lbs
Poultry	122 lbs
Sprouts	12 lbs
Steak and Kidney Pies	2 $\frac{3}{4}$ lbs
Steak and Kidney Pies	34
Smoked Cod	14 lbs

### SUSPECTED FOOD POISONING CASES AND INFECTIOUS DISEASE CASES

#### ASSOCIATED WITH FOOD AND/OR DRINK

During the year 234 cases of suspected food poisoning, enteritis or dysentery were notified to this department. Investigations involved 908 visits to patient's homes and other premises and the submission of 987 specimens for bacteriological examination.

The causal agent was confirmed in the following cases -

Salmonella Paratyphi B.	14
Salmonella typhimurium	4
Salmonella Enteritidis	1
Salmonella Senftenberg	1
Salmonella Landau	1
Salmonella Reading	1
Shigella sonnei	88

The dysentery cases were mostly in family outbreaks and the opportunity was taken to give advice on personal hygiene to the families concerned. There were outbreaks in two Children's Homes where Shigella sonnei was isolated in 22 cases.

The Salmonella Paratyphi B. cases were associated with an Old Age Pensioner's Club holiday in the Channel Islands. Forty-five resided in Birkenhead and investigations revealed one person ill and thirteen symptomless carriers. Negative specimens were eventually obtained from all these patients.

The remaining Salmonella cases were all in isolated family outbreaks and no specific food could be implicated as the source of infection.

A number of outbreaks of diarrhoea in schools at various

times of the year were investigated but no causal agents were identified.

### MEAT INSPECTION

(Report of the Chief Meat Inspector Mr. T.K. Ward)

As another decade draws to its close, it may be of interest to examine the nature of the progress made in the constant endeavour to safeguard the wholesomeness of our meat supplies.

Ten years ago Bovine Tuberculosis was still the major disease menacing the nation's cattle and infecting the meat. Records for 1959 show that the percentage of cattle killed in slaughterhouses in Birkenhead which were infected with tuberculosis was as high as 10%. During that year 104 cattle were totally condemned for generalised tuberculosis and about 5,000 carcasses disclosed tuberculous lesions. This resulted in the condemnation of over 150 tons of meat and offal.

Records of subsequent years show the rapid decline of the incidence of Bovine Tuberculosis as the Ministry's Eradication Scheme progressed until during 1967, no case of generalised tuberculosis was disclosed in local slaughterhouses and during that year the number of carcasses infected with localised tuberculosis fell to 33. Again in 1968 there was no case of generalised tuberculosis found locally and the percentage of cattle infected dropped to 0.75%. During the year under review only one case of tuberculosis was found and that was a very minor infection.

Ten years ago, too, Swine Fever was a very real problem. In 1963 over 250,000 pigs were destroyed in Great Britain as a consequence of 600 outbreaks of this disease, including the entire stock of pigs on two farms within the Borough. In 1969 no case of Swine Fever was recorded in any part of the country and the disease is now regarded as eradicated.

The disastrous outbreak of Foot-and-Mouth Disease which lasted from October 1967 to June 1968, causing the destruction of close on half a million animals, was followed by the Northumberland Committee of Enquiry into the outbreak. The Report issued by this body has had the effect of an overhaul of the legislation on Foot-and-Mouth Disease in order that any future outbreaks may be quickly contained and overcome.

Attention is now being paid to the problem of Brucellosis in cattle, and herds are being subjected systematically to blood-testing and eradication of infected cattle by slaughter.

The principal Acts and Regulations which enable the Meat Inspection Staff to exercise its powers of inspection and to



maintain supervision of meat supplies are :-

Birkenhead Corporation Act, 1954.  
 Food and Drugs Act, 1955.  
 Slaughter of Animals Act, 1958.  
 Slaughterhouses (Hygiene) Regulations, 1958.  
 Slaughter of Animals (Prevention of Cruelty) Regulations, 1958.  
 Food Hygiene (General) Regulations, 1960.  
 Food Hygiene (Docks, Carriers, etc.) Regulations, 1960.  
 Meat Inspection Regulations 1963.  
 Slaughterhouses (Hygiene) (Amendment) Regulations, 1966.  
 Meat Inspection (Amendment) Regulations, 1966.  
 Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations, 1966.  
 Meat (Sterilisation) Regulations, 1969.

#### MEAT INSPECTION REGULATIONS, 1963.

During the year a total of 29,311 animals were slaughtered within the Borough :-

	<u>Cattle</u>	<u>Calves</u>	<u>Sheep and Lambs</u>	<u>Pigs</u>
1969	5249	4	18665	5393

All were subjected to ante-mortem and post-mortem inspection. The following table represents a summary of the results of the post-mortem inspections of the various classes of livestock.

FIG. 1.

	Cattle	Calves	Sheep & Lambs	Pigs
Number slaughtered	5249	4	18665	5393
Number Inspected	5249	4	18665	5393
All diseases except Tuberculosis and Cysticerci - whole carcasses condemned	15	1	19	24
Carcases of which some part or organ was condemned	2027	Nil	7466	1870
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	39%	25%	40%	35%

continued

	Cattle	Calves	Sheep & Lambs	Pigs
Tuberculosis only - whole carcasses condemned	Nil	Nil	Nil	Nil
Carcases of which some part or organ was condemned	4	Nil	Nil	Nil
Percentage of the number inspected affected with tuberculosis	.0008%	Nil	Nil	Nil
Cysticercosis - Carcasses of which some part or organ was condemned	1	Nil	Nil	Nil
Carcases submitted to treatment by refrigeration	1	Nil	Nil	Nil
Generalised and totally condemned	Nil	Nil	Nil	Nil

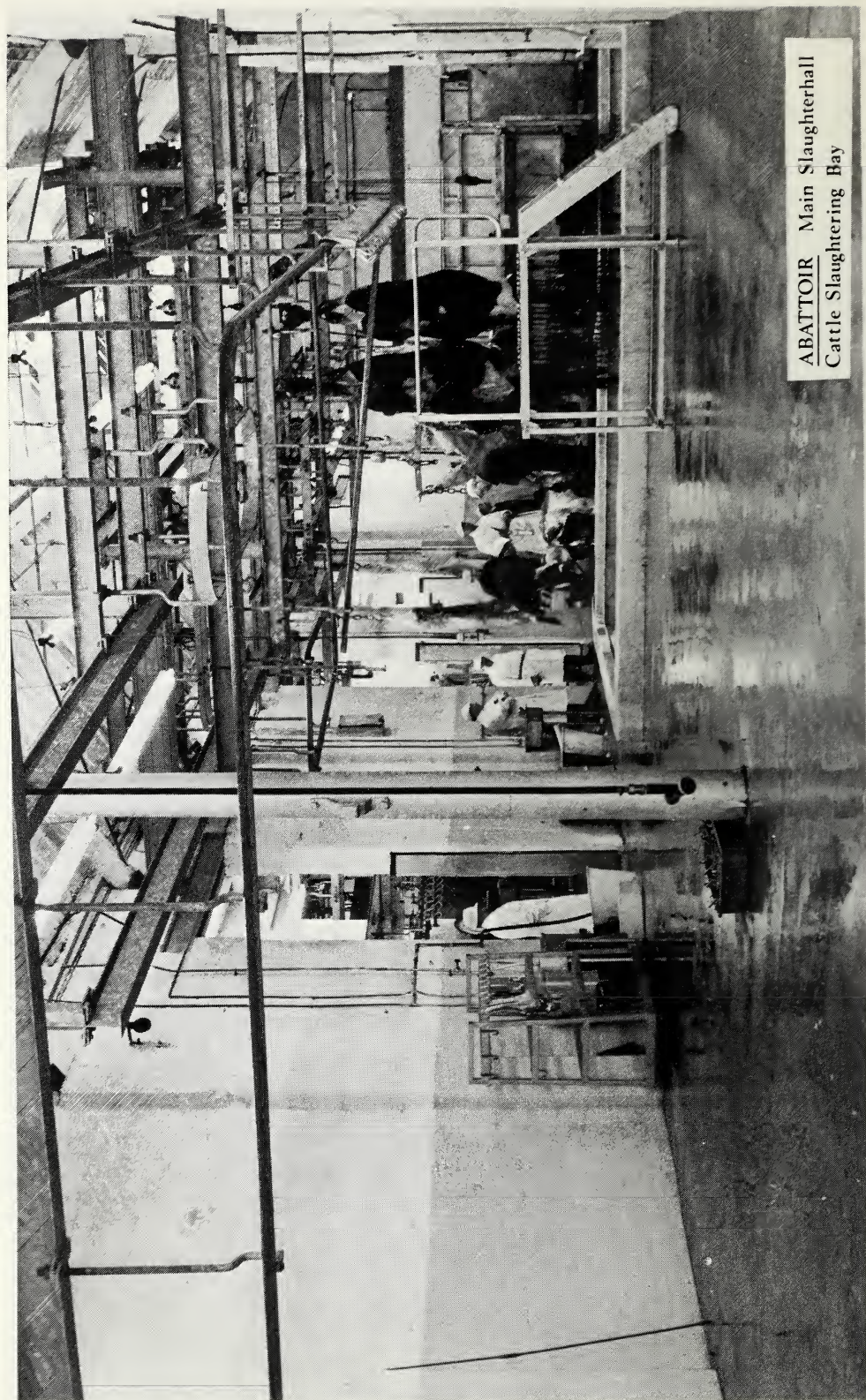
Weight of condemned carcasses and portions - 6 tons 4 cwts.

Weight of condemned offal and portions - 21 tons 9½ cwts.



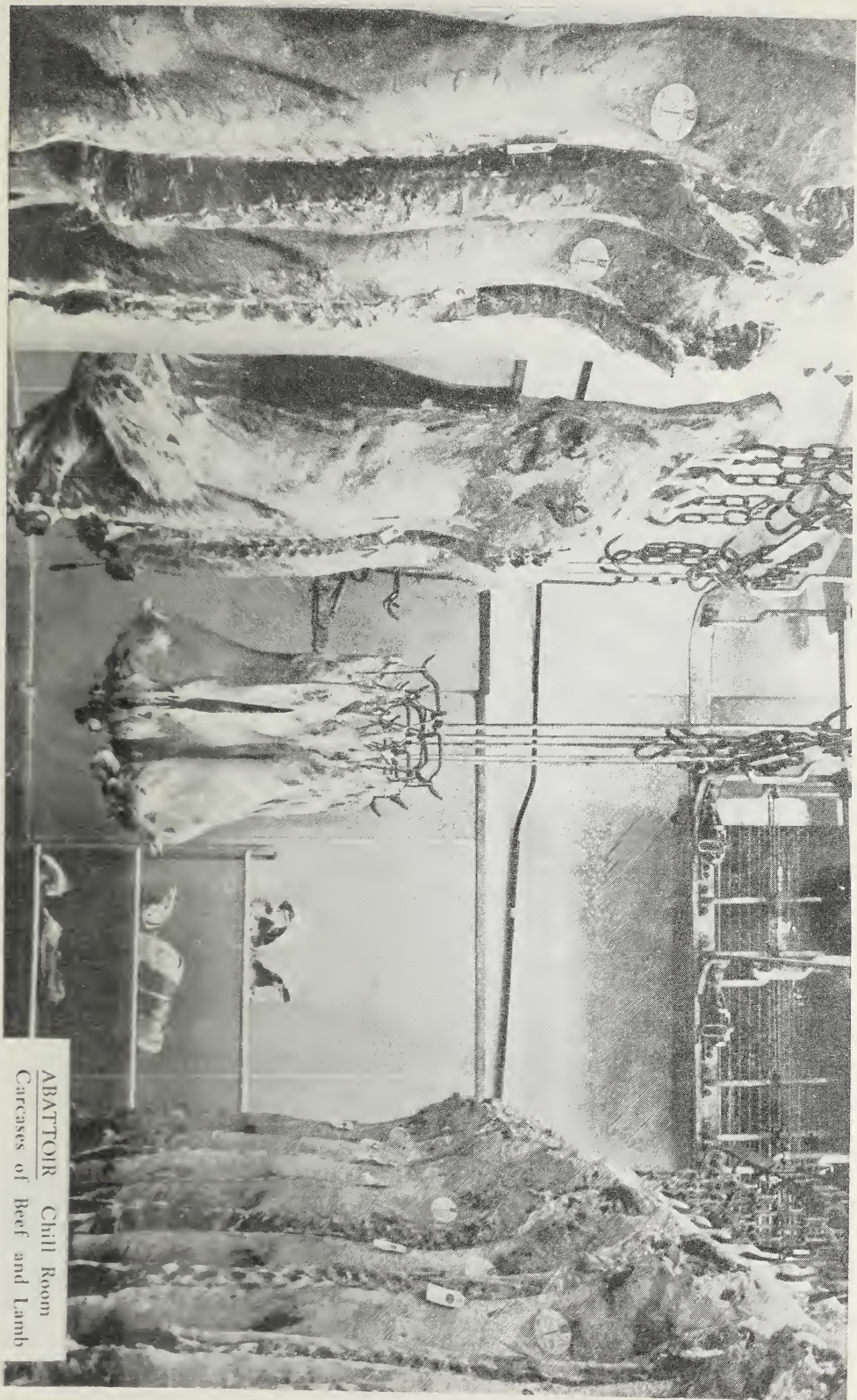
INSPECTOR OF NUISANCES 1900





ABATTOIR Main Slaughterhall  
Cattle Slaughtering Bay





ABATTOIR Chill Room  
Carcasses of Beef and Lamb





PUBLIC HEALTH INSPECTOR 1970

The number of animals slaughtered at Tranmere Abattoir and Woodside Lairage respectively during the year was as follows :-

FIG. 2.

	Cattle	Calves	Sheep and Lambs	Pigs
Tranmere Abattoir	5186	4	18665	5391
Woodside Lairage	63	-	-	2
Totals -	5249	4	18665	5393

#### TRANMERE ABATTOIR

Negotiations which had been proceeding between the Birkenhead Corporation and the Fatstock Marketing Corporation culminated, early in the year, in a plan for the improvement and modernisation of Tranmere Abattoir. Work, commenced in May and proceeding until October, succeeded in giving the abattoir a new look. Lairages were re-designed, slaughterhouse walls were given an impervious surface, floors were renewed, a more modern system of overhead tracking devised, further chill-room accommodation installed, and a general improvement achieved. Day to day slaughtering continued, restricted by the activity of the building contractors, and there was some inevitable reduction in throughput.

The following tables are a summary of condemnations at Tranmere Abattoir, together with percentage figures of the incidence of tuberculosis and conditions other than tuberculosis.

FIG. 3.

	Cattle	Calves	Sheep and Lambs	Pigs
Whole carcasses condemned for tuberculosis	Nil	Nil	Nil	Nil
Part carcasses condemned for tuberculosis	1	Nil	Nil	Nil
Number of carcasses of which some organ was condemned for tuberculosis	4	Nil	Nil	Nil
Percentage of the number inspected affected with tuberculosis	.0003%	Nil	Nil	Nil

Total weight of carcase meat condemned 18 lbs

Total weight of offal condemned for tuberculosis 42 lbs.

FIG. 4.

	Cattle	Calves	Sheep and Lambs	Pigs
Whole carcasses condemned for conditions other than tuberculosis	14	1	19	24
Parts of carcasses condemned for ditto	95	Nil	54	414



Total weight of carcase meat condemned  
for conditions other than tuberculosis 5 tons 17½ cwts

Total weight of offal condemned for  
ditto 19 tons 9 cwts

### WOODSIDE LAIRAGE

Since 1879 Birkenhead has been one of the principal ports of entry for imported livestock. The Foreign Animals Landing Wharf is situated adjacent to Woodside Ferry and is generally known as Woodside Lairage. Today the rows of slaughtering booths are silent and the vast lairages only partly filled as the pattern of the meat and livestock industry changes. Ireland has developed its own slaughtering industry and the need for the services of Woodside Lairage have diminished. Even so a total number of 96,616 cattle, sheep and pigs were landed at Woodside during the year. Of these, 65 animals were considered to be unfit to travel further and were slaughtered in the emergency slaughterhouse.

The following tables are a summary of condemnations at Woodside Lairage.

FIG. 5.

	Cattle	Calves	Sheep & Lambs	Pigs
Whole carcasses condemned for tuberculosis	Nil	Nil	Nil	Nil
Part carcasses condemned for tuberculosis	Nil	Nil	Nil	Nil
Number of carcasses of which some organ was condemned for tuberculosis	Nil	Nil	Nil	Nil
Percentage of the number inspected affected with tuberculosis	Nil	Nil	Nil	Nil

Total weight of carcase meat condemned for tuberculosis Nil

Total weight of offal condemned for tuberculosis Nil

FIG. 6.

	Cattle	Calves	Sheep and Lambs	Pigs
Whole carcasses condemned for conditions other than tuberculosis	1	Nil	Nil	Nil
Parts of carcasses condemned for ditto	18	Nil	Nil	1

Total weight of carcase meat condemned  
for conditions other than tuberculosis 6½ cwts.

Total weight of offal condemned for  
ditto 2 tons.

#### EMERGENCY SLAUGHTER.

During the year at Woodside Lairage a total of 65 animals comprising 52 bullocks, 11 heifers and 2 sows were considered to be sick or injured and were the subject of casualty slaughter. The entire carcase of 1 heifer was condemned as also were part carcasses of 18 bullocks and 1 sow. In the case of the remainder condemnations were confined to the viscera.

#### IMPORTED FOOD REGULATIONS, 1968.

During the year notifications were received from various Port Health Authorities of the delivery to Birkenhead of 105 consignments of imported food comprising 4,305 qtrs beef, 95 boxes boneless beef, 30 lamb carcasses, 8 saddles mutton and 370 bales bacon, and 1 container of tomatoes. In addition 12 consignments of animal fat were delivered to a local processing factory. All consignments were inspected and the following quantities condemned :-

419 lbs beef  
50 lbs lamb  
17 tons tomatoes.

WHOLESALE MEAT DEPOTS.

Check inspections of meat stored for sale in Cold Stores and Wholesale Meat Depots were made. A total of 170 visits were made and as a result of inspections 4 tons 15 cwts of meat and other foods were condemned, comprising 4 tons 8½ cwts of carcase meat, 1½ cwts of offal, 75 tins of cooked meat weighing 2½ cwts and 61 poultry carcasses weighing 2½ cwts.

SALUGHTERHOUSES (HYGIENE) REGULATIONS, 1958.

Periodic inspections of the slaughterhouses are made under the provisions of these Regulations. Works of improvement at Woodside Lairage included cleansing, painting and limewashing. Since the ending of commercial slaughter in November 1968, the main slaughterhouses have stood idle but the three emergency slaughterhouses are in intermittent use.

Works of considerable repair and improvement have been achieved at Tranmere Abattoir with the desired result of bringing the premises up to the stringent standard of the Regulations.

SALUGHTER OF ANIMALS (PREVENTION OF CRUELTY) REGULATIONS, 1958.Woodside Lairage.

There is lairage accommodation on the Cattle Landing Stage for any animal fatigued by the sea voyage, and a casualty slaughterhouse is also available on the stage. The main lairages offer accommodation for 6,000 cattle, 5,200 sheep and lambs and 2,000 pigs at any one time. All lairages are equipped with water troughs to each of which there is a permanent water supply. Large stocks of hay and straw are always available for feeding and bedding. Two other slaughterhouses have been designated for use for the slaughter of any animals too sick or injured to be transported alive from the Wharf.

Tranmere Abattoir.

The main slaughterhall is equipped with a stunning pen for cattle and a casting pen for kosher slaughter. Electric stunning instruments are installed for pre-slaughter stunning of pigs, sheep and lambs. The cattle pens are fitted with overhead mangers, and hay and straw are stored for feeding and bedding. The pens are provided with drinking troughs, and water for drinking is available at all times.

SLAUGHTER OF ANIMALS ACT, 1958.

The stunning and slaughtering of animals in a slaughterhouse is prohibited except by persons in possession of a Slaughterman's Licence granted by the Local Authority. As at

31st December 1969 there were 19 licences in force.

#### FOOD HYGIENE (MARKETS, STALLS AND DELIVERY VEHICLES) REGS.1966.

Check inspections were made of butchers' delivery vehicles at slaughterhouses and wholesale depots. Three contraventions of these Regulations were successfully prosecuted in the Magistrates Court.

#### DISPOSAL OF CONDEMNED MEAT AND OFFAL.

Meat and offal, which is rejected as unfit for human consumption at abattoirs, cold stores and wholesale meat depots, is removed by contractors to processing plants outside the Borough for heat treatment. By-products include animal foodstuffs, tallow and fertiliser.

#### PET ANIMALS ACT, 1951.

This Act regulates the sale of pet animals and makes it an offence to keep a pet shop except under the authority of a licence granted by the Local Authority. During the year four applications for licences were granted, one licence was surrendered and eleven licences were renewed. These shops are visited periodically to ensure compliance with the terms of the licence. Notice served restricting the use of certain rooms in one pet-store was complied with.

#### BIRKENHEAD CORPORATION ACT, 1954.

Section 98 of the above Act regulates the sale of animal feeding meat and provides for the registration of approved premises. During the year three applications for registration were granted and two registrations were cancelled. There are now fifteen registered premises within the Borough all receiving periodic visits of inspection.

#### MEAT (STERILISATION) REGULATIONS, 1969.

These new Regulations amend and replace the Meat (Staining and Sterilisation) Regulations, 1960. The effect is to prohibit entirely the sale of unprocessed meat as pet animal food unless it has been inspected and passed for human consumption. It is no longer legal to offer for sale stained knacker meat or other condemned meat or offal. Regular visits keep a check of the sources of pet meat and conditions of storage.

#### RIDING ESTABLISHMENTS ACT, 1964.

This Act provides that no person shall keep a riding establishment except under the terms of a licence granted by



the Local Authority. Stables were inspected and found to be in a clean and satisfactory state and the horses and premises in good condition. Three applications for licences were received and the premises and horses were subject to veterinary inspection. Improvements to the premises were recommended in each case and provisional licences were granted.

#### ANIMAL BOARDING ESTABLISHMENTS ACT, 1963.

This Act provides for a system of licensing of premises at which a business of accommodating cats and dogs is carried on. Two applications for renewal of licence were received and were granted after inspection of the kennels. Periodic inspections of the premises are made and the conditions of the animals observed.

#### DISEASES OF ANIMALS ACT, 1950.

In addition to the publication of the Orders of the Ministry of Agriculture, Fisheries and Food, and the supervision of cleansing and disinfection of infected farm premises, and the licensing of the movement of livestock, it is also the duty of the Local Authority to enforce all Orders made for the protection of animals and poultry from unnecessary suffering during transit.

The principal Orders which enable the Inspectorate to exercise their powers of inspection are :-

- Transit of Animals Order, 1927.
- Fowl Pest Order, 1936.
- Anthrax Order, 1938.
- Tuberculosis (Slaughter of Reactors) Order, 1950.
- Transit of Horses Order, 1951.
- Diseases of Animals (Waste Foods) Order, 1957.
- Regulation of Movement of Swine Order, 1959.
- Movement of Animals (Records) Amendment Order, 1960.
- Live Poultry (Restrictions) Order, 1963.
- Swine Fever Order, 1963.
- Exported Animals Protection Order, 1964.
- Diseases of Animals (Seizure of Carcasses) Order, 1964.
- Foot-and-Mouth Disease (Amendment) Order, 1969.
- Exotic Animals (Importation) Order, 1969.

#### TRANSIT OF ANIMALS ORDER, 1927.

During the year a total importation of 94,063 cattle, 1,878 sheep and lambs, 430 pigs and 171 goats from Ireland and Isle of Man and 74 cattle from Canada, were landed at Woodside Lairage. This shows a reduction compared with the figures for

previous years, due to shipping difficulties which are not yet resolved. In 1968 British Railways withdrew the cattle transport service from the Wharf and the shipping difficulties which have arisen in 1969 must cast some doubt on the continuance of the cattle trade at Woodside. Livestock are now being transported away from the Lairages by road. Check inspections are made on transport vehicles and arrangements exist for the cleansing of any vehicles which require such service. The animals while detained in the Lairages, are adequately fed and watered.

#### FOWL PEST ORDER, 1936.

The national incidence of Fowl Pest continues to decline. Only 43 outbreaks of the disease were confirmed during the year in Great Britain. There were no cases within the Borough.

#### ANTHRAX ORDER, 1938.

There were no cases of Anthrax within the Borough during the year, although the national incidence shows a slight increase there having been 235 confirmed outbreaks causing the deaths of 259 farm animals throughout the country.

#### TUBERCULOSIS (SLAUGHTER OF REACTORS) ORDER, 1950.

Seven cattle which had reacted to the Tuberculin Test were received into Tranmere Abattoir for slaughter and inspection. Three of the cattle disclosed tuberculous lesions on post-mortem examination, and reports were sent to the Ministry of Agriculture.

#### TRANSIT OF HORSES ORDER, 1951.

During the year a total of 1,275 horses and asses were landed at Woodside Lairage. During their detention they were adequately fed and watered. Check inspections of horse-boxes and transport vehicles were made before the animals left the premises.

#### DISEASES OF ANIMALS (WASTE FOODS) ORDER, 1957.

This Order prohibits the feeding of unboiled waste food to farm animals or poultry and requires that such waste food shall be boiled for at least an hour in boiler plant licensed by the Local Authority. During the year six licences were revoked owing to the licensees either ceasing to use waste foodstuffs or ceasing to keep pigs. There are at present two licences in force and regular inspections of piggeries and boiler-plants were made to ensure that the Order was being complied with.

REGULATION OF MOVEMENT OF SWINE ORDER, 1959.

During the year 439 store pigs and 59 breeding sows were brought into the Borough on Movement Licence. During the period of 28 days detention the farms and piggeries concerned were visited and the pigs were examined.

MOVEMENT OF ANIMALS (RECORDS) ORDER, 1960.

This Order requires that records be kept of the movement of animals onto and off farm premises, and that such records be retained for a specified time. There are four cattle-keepers and five pig-keepers within the town's boundaries. During the year visits to these premises were made and the record-books inspected.

SWINE FEVER ORDER, 1963.

For the third successive year there were no confirmed outbreaks of Swine Fever in Great Britain. This disease is now regarded as having been eradicated from this country.

FOOT-AND-MOUTH DISEASE (AMENDMENT) ORDER, 1969.FOOT-AND-MOUTH DISEASE (CONTROLLED AREAS RESTRICTIONS) (AMENDMENT) ORDER, 1969.FOOT-AND-MOUTH DISEASE (INFECTED AREAS RESTRICTIONS) (AMENDMENT) ORDER, 1969.

The above legislation came into being as a result of the Committee of Inquiry set up to investigate the disastrous outbreak of 1967/68. Their object is to secure a tighter control of movement of animals during an emergency and to contain and overcome any future outbreak. There was no confirmed outbreak of Foot-and-Mouth disease anywhere in Great Britain during the year.

EXOTIC ANIMALS (IMPORTATION) ORDER, 1969.

This Order imposes a general prohibition on the importation of certain nominated animals, and lays down conditions for the importation of certain other prescribed animals. The Quarantine Station was visited and inspected under the authority of this Order.

EXPORTED ANIMALS PROTECTION ORDER, 1964.

The following animals were exported from Birkenhead Docks to Japan for breeding purposes :-

1 pedigree English bull and 18 heifers  
45 large white sows and boars  
9 Landrace sows and boars

IMPORTATION OF ANIMAL PRODUCTS ORDER, 1954.

A quantity of ship's stores comprising meat and offal were off-loaded from a ship in Birkenhead dock and conveyed into Cold Store under the authority of a licence issued by the Ministry of Agriculture. The conditions of the licence were observed.

BRUCELLOSIS (ACCREDITED HERDS) SCHEME.

Under this Scheme, animals which show a positive reaction to the official Brucella blood test are required to be sent for slaughter under licence issued by the Ministry of Agriculture. During the year twelve cows were received into Tranmere Abattoir in accordance with the terms of the Scheme.

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Mr. T.K. Ward the Chief Meat Inspector has provided these historical articles on Meat Inspection and the account of the work of this section in 1969.

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### MEAT INSPECTION THROUGH THE AGES

Although the Meat Inspection Regulations, 1963, are the most recent piece of legislation dealing with Meat Inspection, the matter has been the subject of pronouncement and edict, both written and oral, since the days of earliest record. Primitive man was the hunter and meat-eater and, since the animal kingdom is as prone as mankind to disease, it is logical to expect that as soon as early society became organised, certain prohibitions would be made. Thus, in Leviticus, we find an almost complete memorandum on meat inspection, not different in too many aspects from the more secular enjoinders of the Meat Inspection Regulations.

" That which dieth of itself, or is torn with beasts, he shall not eat....." "Blind, or broken, or maimed, or having a wen, or scurvy, or scabbed, ye shall not offer....."

" Either a bullock or a lamb that hath any thing superfluous or lacking in his parts ..... shall not be accepted."

" Ye shall not offer that which is bruised, or crushed, or broken, or cut....."

" Whatsoever hath a blemish..... shall not be acceptable for you."

These extracts from Moses' dietary laws establish that from very early times mankind was aware of the inherent danger in consuming diseased flesh.

One of the earliest references in British history occurred in 1206. A.D. in an Act of Parliament passed by Henry III in which he charges the Butchers Guild with the duty of preventing the sale of diseased meat and to punish offenders. One hundred years later during the reign of Edward II, butchers who were convicted of selling unsound meat were punished by being stood in the pillory and having the offending flesh burnt under their nostrils.

It is interesting to note that in 1377 a complaint was heard that excessive prices were being demanded for lamb carcasses viz: 1/6d and 1/8d each. Proclamation by the Mayor and Aldermen of London fixed the price of Best Lamb at 1/- per carcass and other lambs at 8d to 10d per carcass. Other prices set were -

Best Goose 6d. Best Capon 6d. Best Hen 4d. Best Rabbit 4d

Best Sucking Pig 8d. Carcase of Mutton 2/-.

This is the first record of price control.

In 1422 regulations made by the Master of the Butchers Company forbade the sale of measly and unsound pork, also any flesh that had been killed more than three days in winter or more than two days in summer. Responsibility for the wholesomeness of his meat rested then, as now, on the butcher, but then he had to act as his own meat inspector and was in a position of jeopardy if failure on his part caused complaint from the customer. Today's butcher has the help of the meat inspector: nevertheless he is still in jeopardy if he sells unsound meat causing complaint by a customer.

In 1875 the first really important piece of public health legislation came on the statute book. This was the Public Health Act, 1875. Section 117 of which states "Any medical officer of health or sanitary inspector may, at all reasonable times, inspect and examine any animal, carcase, meat, poultry, game, flesh, fish, fruit, vegetables, corn, bread, flour or milk exposed for sale, or deposited in any place for the purpose of sale, or preparation for sale and intended for the food of man, and if any such animal, carcase, meat, etc. appears to him to be diseased or unsound or unwholesome or unfit for the food of man, he may seize and carry away the same in order to have the same dealt with by a justice."

This section is re-enacted by the Food and Drugs Act, 1955, of which Section 9 states more concisely "An authorised officer of a council may at all reasonable times examine any food intended for human consumption which has been sold, or is offered or exposed for sale, or is in the possession of, or has been deposited with or consigned to, any person for the purpose of sale or of preparation for sale, and, if it appears to him to be unfit for human consumption, may seize it and remove it in order to have it dealt with by a justice of the peace."

It will be observed that the word "may" gave authority to certain officers of the council to inspect, seize and carry away, but laid upon them no statutory obligation to do so. That did not come, until in 1963, the Minister of Health and the Minister of Agriculture, acting jointly under the powers of the Food and Drugs Act, 1955, made the Meat Inspection Regulations, 1963. Regulation 3 states "Every local authority shall arrange for the inspection by an inspector of the carcase of every animal slaughtered within their district for sale for human consumption." This was mandatory and henceforth all carcasses and offals must be subjected to inspection.

These Regulations refer to animals slaughtered in Great Britain but a considerable amount of meat and foods of all kinds come to us from all parts of the world. This was dealt with by the Public Health (Imported Food) Regulations, 1937, and the meat and food was subject to inspection by

inspectors of the Port Health Authority at the port of entry. These Regulations were replaced by the Imported Food Regulations, 1968, which prohibits the importation of unfit food and lays the onus of responsibility upon the importer. The imported food is subject to inspection by Port Health Inspectors or, in certain cases, by the Public Health Inspectors of the Local Authority to which it has been consigned.

Field work by the Ministry of Agriculture veterinary staff has resulted in great benefit to animal health. Sheep-pox was eradicated in 1866 and cattle-plague in 1877. Pleuro-pneumonia was eradicated in 1898, parasitic mange in 1948 and sheep-scab in 1952. There has been no confirmed case of swine-fever in Great Britain since 1966 and the disease may now be regarded as eradicated. In 1962, 3,384 outbreaks of Fowl-Pest were confirmed but only 43 in 1969. Ten years ago 10% of cattle slaughtered in British abattoirs were tuberculous: today the figure is less than 1%.

At present work is progressing towards the eradication of Brucellosis from British herds. This disease, which is more likely to be spread to human beings through milk rather than through meat, causes in-calf cows to abort with consequent loss of money to the farmer and loss of potential to the nation's larder.

Records indicate that the Israelites, the Ancient Egyptians and the Romans all had due concern for inspection of their meat but it is probable that at no time in history has the consuming public been exposed to less risk of diseased meat than at the present time.

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WOODSIDE LAIRAGE

Once again the alarm bell rings for Woodside Lairage. How many times in its ninety years existence has Woodside Lairage been doomed to extinction, merely to re-appear in all its energy with the swing of the pendulum? Where is Woodside Lairage, anyway, and what is it? And how many people of the town have the faintest conception of the magnitude of the operations carried on there since time beyond the memory of our oldest inhabitant?

On the northerly side of Woodside Ferry and adjacent to the site of the old floating roadway is situated a complex that has been claimed to be the largest of its kind in the world. Covering twenty acres, situated between Shore Road and the River Mersey, and stretching along half a mile of water-front, it has provided facilities for docking of cattle-boats, discharging of live cargoes, lairaging and slaughtering of fatstock, transit of store animals and distribution of meat supplies. At any one time 6,000 cattle, 5,200 sheep and 2,000 pigs can be accommodated under cover. One cattle shed is a quarter of a mile long. Another cattle shed which has its own electric, self-operated lift and hoists, holds cattle on three floors. Connecting runways, one of which is three-quarters of a mile long, are installed to distribute the livestock to the various sheds. In the golden days over two hundred lairage men were engaged in the business of handling. The lairage possesses its own rail-tracks, its block of offices for traders, shipping companies, railways, Ministry of Agriculture officers, Dock Board staff and Meat Inspectors. There are maintenance shops, a refrigerating plant and twenty-three large refrigerated chambers. Until recent times it even had its own bank. There are twenty-one slaughtering bays and five emergency slaughterhouses, the latter being situated in different parts of the Wharf, one on the landing-stage itself for the immediate slaughter of animals which are too sick or injured to be moved to the main slaughtering bays.

This complex is owned and maintained by the Mersey Docks and Harbour Board and is officially titled 'The Mersey Cattle Wharf'. It was first established in 1879 to deal with the importation of livestock from abroad, its object being to isolate such stocks so that no disease could be carried to the herds and flocks of England. That was the first object of the Wharf and it is still its principal and most important function.

In those early days the only country exporting stock to Britain was the United States of America which, in 1879, sent 32,000 cattle to Birkenhead. The trade, however, quickly grew and other countries contributed in turn - Canada, Argentine, Spain, Portugal, Chile, Iceland and the Falkland Islands. The number of animals landed increased from the modest 32,000 cattle in 1879 to 282,000 cattle and 287,000 sheep



in 1897, the monetary value of which amounted to many millions of pounds.

To accommodate this steadily growing and important trade, extension after extension had to be made to the modest beginning. Slaughterhouse and cooling-hall accommodation was increased to achieve a capacity of 2,000 cattle per day and a block of slaughterhouses for sheep was built capable of handling 7,000 sheep per day. Chill rooms were erected to accommodate 7,000 sides of beef at any one time and markets for both carcasses and live animals did a flourishing business.

Between the years 1879 and 1912 the trade at the Cattle Wharf waxed and waned according to the tides of fortune. Reaching their zenith in 1897 the slaughtering figures gradually declined until, in 1912, the vast organisation which had been called into being was almost idle. Grass grew between the railway lines and the stone setts of the market square and, as now, the prophets of gloom were loud in the land. Then, as now, the future use of Woodside Lairage was a matter for anxious debate.

Then, dramatically, occurred one of those unknown factors, those unforeseen incidents, such as put the prophets of woe out of business. A great outbreak of Foot-and-Mouth disease ravaged the herds and flocks of Ireland.

For many years Ireland had exported to this country - annually - an average of three-quarters of a million cattle and many hundreds of thousands of sheep and lambs, goats and pigs, and these animals had been sold in the open markets of Stanley, Salford, York, Wakefield, etc. Now the presence of disease, however, amongst Irish herds made that mode of sale impossible. For the disease to have reached English herds would have been nothing short of a national calamity. The meat, however, was a necessity; and since no killing plant of any magnitude existed in Ireland, the services of the Foreign Animal Wharfs at Woodside and Wallasey were called into use, since with separate landing stages it was possible to land cattle at Wallasey and isolate them and keep them under observation by the Government Veterinary experts for so many days or hours, after which they were driven over the runway to Woodside where they were marketed and slaughtered. It was well during this crisis all the equipment built up over long years for the Foreign trade was available for, as the steady stream of boats landed their cargoes, they were as steadily absorbed by the only equipment in England capable of handling them in such numbers.

The first Irish animals landed at Wallasey on 12th July 1912 and from then to 1st December of that year there were landed - 143,114 cattle, 335,291 sheep and lambs and 69,016 pigs, in addition to 819 cattle from Canada.

In course of time the disease was eradicated so that it was possible, after detention and examination, to allow a portion of the stock to travel again to the open markets.

It will thus be seen that the Mersey Cattle Wharf is complete in every detail. The boats bring the livestock to its landing-stages on the river front and the railways run inside its gates to bear the finished products to all parts of England, Scotland and Wales. It is unique, and capable of handling the whole of the fatstock exported from Ireland; whilst it is always competent to receive and deal with foreign live animals through the Foreign Animals' section of the Wharf. But, over and above all, its function is that of detecting and arresting disease in livestock, and so preserving the flocks and herds of England from the risk of contagion. In this it possesses a national, over and above its purely local, importance.

Why, then, should the future of this national asset be wrapped in doubt? The answer may lie in the changing trends of the trade. In post-war years Ireland has developed its own meat industry. It now has over fifty slaughterhouses capable of handling and slaughtering the bulk of its own fatstock. The container trade has grown up and the Anglo-Eire Trade Agreement has assured Ireland of a market for its meat. It has been calculated that a throughput of 100,000 cattle per year is necessary for the commercial slaughtering facilities of the Wharf to be a viable economic proposition, and the last time this figure was achieved was in 1962. Towards the close of 1968 the number of animals landed for slaughter had been so reduced that the slaughtering facilities were withdrawn from the trade.

At the same time the landings of store cattle began to diminish. Europe's hunger for meat sent their buyers to Ireland to outbid British buyers for available cattle. With the higher price meat can fetch on the markets of European countries foreign buyers were able to offer prices that could not be competed with. Difficulties mounted at Woodside and, in 1968, British Railways withdrew their service of cattle transport. Henceforth all livestock needed to be transported by road. The next to suffer from the diminution of supplies was the shipping company which was obliged to increase its rates with the inevitable result that supplies became even scarcer.

Running parallel with these events has been the changing methods of British farming with the development of factory farming. The encroachment of urban development reduces British farmland by thousands of acres each year so that the modern method of cattle-raising involves large numbers of animals in huge sheds and slaughter at an early age for a quicker turnover. The supply of store animals for fattening on British meadows has dropped but so has the demand for them by British farmers. The present position is that the meat supplied by our own farming industry is supplemented by adequate supplies from Ireland, New Zealand, Argentine and other countries from time to time under various trade agreements and as long as that continues the situation is satisfactory. It should not take too much imagination,

however, to see that other factors could interpose themselves to upset this balance. The disastrous series of outbreaks of Foot-and-Mouth Disease in England in 1967/8 are still fresh in our memory and the possibility of an even worse disaster in future years would indicate an element of insecurity. New Zealand is fast developing a trade with America and the Far East for its lambs and Argentina, restive under the exacting conditions imposed on the importation of its meat into this country, seeks other outlets. It may well be that Woodside Lairage has not yet outlived its usefulness and that very careful consideration of all aspects of the meat trade is necessary before sentence is pronounced.

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WATER SUPPLY

I am indebted to the Engineer and Manager of the Wirral Water Board, Mr. N.H. Gimson, B.Sc., F.I.C.E., M.I.W.E., for the information about the water supplies in the Borough.

The supply to the Borough is, in the main, a mixture of impounded water from the Alwen Reservoir in North Wales and river water from the River Dee at Chester, together with a small amount of underground water taken from wells at Spring Hall and Flaybrick which are situated within the Borough. The supply has been satisfactory in quality and quantity. Restrictions were imposed in the Board's area of supply on the use of hose pipes for watering gardens and washing cars from the 1st April, 1969, and this will continue until the Mid-Wirral Trunk mains are operative later in the year.

The main water works laboratory is situated at Sutton Hall Treatment Works near Capenhurst and is operated by a full-time Chemist and Bacteriologist and four assistants, who supervise the treatment process and undertake regular chemical and bacteriological examinations. There have been no cases of contamination during 1969. As a general measure all new mains are chlorinated before being brought into use.

Treatment of the Alwen supply is by pressure filtration followed by sterilization by chlorine and ammonia.

Treatment of the Dee supply is by settlement in upward flow sedimentation tanks followed by rapid gravity filtration and paper chlorination.

Treatment of the wells supply - marginal chlorination only.

The Wirral Water Board carries out regular bacteriological and chemical analyses of the water from the different sources. Copies are supplied to the Health Department. Samples of the water as supplied to the consumer are taken regularly by the Health Department for bacteriological analysis and the results sent to the Wirral Water Board. Throughout the year the results have been satisfactory. The water supplied to the Borough is not plumbo solvent. The fluoride content of the water from all sources is less than 0.1 p.p.m.

The estimated number of dwellings in the Borough is approximately 44,000. All properties are supplied direct from the distributive system.

FLUORIDATION

During 1969, the Birkenhead Council confirmed the previous opposition to fluoridation. This was despite advice to the contrary from the Chief Dental Officer and the Medical Officer of Health. Not all the Council Members are against the procedure, but the idea of mass medication, even though it is for the benefit of the dental health of future generations of children, is the main cause of opposition. The opposition is undoubtedly shared by some members of the public and the National Pure Water Association.



AVERAGE ANALYSIS FOR 1969 OF THE WATER ENTERING  
THE DISTRIBUTION SYSTEM OF BIRKENHEAD COUNTY BOROUGH

Results expressed as mg/l except where otherwise stated

< = less than

Source	Crosshill Reservoir	Flaybrick Reservoir	Prenton Reservoir	Tranmere Reservoirs and Tanks
Appearance				
Colour, Hazen Units	10	4	2	3
Turbidity F.E. Scale	2	< 2	< 2	< 2
Taste/Odour				
Residual Chlorine				
pH	7.80	7.10	7.30	7.20
Electrical Conductivity Mmhos/cm <sup>3</sup>	230	300	635	390
Oxygen absorbed, 4 hrs. @ 27°C	0.9	0.5	< 0.1	0.3
Free Carbon Dioxide as CO <sub>2</sub>	1	3	11	5
Ammoniacal Nitrogen as N	0.08	0.06	< 0.02	0.08
Albuminoid Nitrogen as N	0.09	0.06	< 0.02	0.11
Nitrite Nitrogen as N	< 0.01	< 0.01	< 0.01	< 0.01
Nitrate Nitrogen as N	0.9	2.1	3.7	4.4
Chloride as Cl	23	36	89	44
Sulphate as SO <sub>4</sub>	36	35	29	50
Total Alkalinity as CaCO <sub>3</sub>	50	60	190	84
Carbonate Hardness as CaCO <sub>3</sub>	50	60	190	84
Non-Carbonate Hardness as CaCO <sub>3</sub>	14	30	65	61
Total Hardness as CaCO <sub>3</sub>	64	90	255	145
Calcium as CaCO <sub>3</sub>	52	58	180	92
Magnesium as CaCO <sub>3</sub>	12	32	75	53
Sodium as Na	26	28	45	30
Potassium as K	2	3	4	3
Iron as Fe	0.04	0.05	< 0.02	< 0.02
Manganese as Mn	0.03	< 0.02	< 0.02	< 0.02
Aluminium as Al	0.26			
Silicates as SiO <sub>2</sub>				
Phosphate as P <sub>2</sub> O <sub>5</sub>				
Total Dissolved Solids dried at 180°C	155	200	435	260

Lord Cohen of Birkenhead, who was Professor of Medicine at Liverpool University and is a leading and renowned citizen of this Borough, said in a speech in the House of Lords -

"There was no evidence to support the view that fluoridation in a concentration of one part per million carried any hazard to general health. To call fluoridation mass medication obscured the issue. The issue is that of deciding if adjusting the level of the natural content of a natural constituent of water in the interests of children who will, as a result, have better teeth now and when they grow up, is justified, even if a proportion of citizens would derive no immediate benefit. Not having fluoridation not only caused discomfort to children but also produced the problem of providing sufficient dentists. Fluoridation would mean a saving of 500 dentists practising full time. If the National Pure Water Association and its supporters continued to object to fluoridation, he hoped it would have greater regard to the ethics of public controversy and would refrain from reckless, incorrect and misleading statements."

Lord Cohen's view is supported by a solid body of scientific opinion. Various eminent commissions and committees have reported in favour of fluoridation after detailed study of the evidence. The Report of the World Health Organisation Expert Committee (1958) of the Commissions of Enquiry in New Zealand (1957) and Ontario (1961) and the Report on the Conduct of Fluoridation Studies in the United Kingdom (Ministry of Health 1962) are well known.

### SEWERAGE

The majority of the property in the Borough is served by public sewers with the exception of a few properties which still have cesspools or septic tanks and these are gradually being eliminated as new developments bring the drainage facilities within their reach.

The Borough is adequately served by the sewers with the exception of the area on the western side which lies within the North Wirral Drainage Area.

This area, together with adjacent areas in Wallasey County Borough, Hoylake Urban District Council and Wirral Urban District Council, has been the subject of a joint scheme for the improvement of the sewerage facilities to serve these areas.

The scheme has been prepared by Consultant Engineers for draining the whole area and involves preliminary treatment of the flow and a 3 mile long sea outfall near Dove Point, Meols.

The Ministry of Housing and Local Government has approved the scheme in principle and there are tentative proposals for the construction work to commence in October 1969 and be completed by December 1971.

There is no sewage treatment works in the Borough and the sewer outfalls to the River Mersey discharge untreated sewage.

The River Mersey is fast becoming a dirty river and Merseyside Authorities will have to think about and correct this problem of our environment in forthcoming years.

#### MEDICAL EXAMINATION OF CORPORATION EMPLOYEES

In order to cut down the number of unnecessary physical medical examinations a medical questionnaire was introduced in July, 1969. The system applied to all officers entering Corporation service. Only candidates with a doubtful medical history were noted for medical examination, although those entering into service and superannuation scheme over 45 years of age completed the questionnaire and were always medically examined.

During the last six months of 1969, 234 questionnaire forms were received, including 85 from part-time school meals staff who were also considered in the questionnaire system. From the total forms received 38 necessitated medical examinations and are included in the medical examination statistics printed.

The equivalent of 20 doctors sessions was saved during the last six months of 1969 as a result of the questionnaire system.

The Birkenhead Transport Authority was absorbed into the wider Merseyside Passenger Transport Executive and thus the 475 examinations of Corporation and omnibus drivers and conductors in the first eleven months of 1969 will not be carried out by Corporation doctors in future.

It is suggested that, as the questionnaire system is well accepted for officers entering Corporation service, it should be extended to include servants of the Corporation. This will mean further saving of doctor sessions and it would seem that if this course is adopted next year only one female and one male medical session weekly will be required.

It seems far more logical to expend doctor time to supervise Corporation employees suffering from defects or ill health which keep them away from work for considerable time. Our aim is not to usurp the work of the family doctors and we are grateful for the co-operation they have given.

Department	Not Passed		Passed for:					Recommended for Premature Retirement	Examination for:				Special Examinations	Totals
	Service	Superannuation	Service	Service and Superannuation	Service, Superannuation & Driving P.S.V.'s	Superannuation	Teaching Appointments	Entry into Teachers' Training Colleges	Driving P.S.V.'s	Work in Mersey Tunnel	Tar Cancer	Disablement		
Architect	1	-	15	9	-	-	-	-	-	-	-	-	-	25
Baths and Markets	-	1	8	6	-	-	-	-	-	-	-	-	-	24
Borough Valuer	-	-	-	3	-	-	-	-	-	-	-	-	-	3
Children's	-	1	-	3	-	-	-	-	-	-	-	-	-	5
Cleansing	-	1	38	3	-	-	-	-	-	-	-	-	-	63
Education	-	1	98	33	-	-	18	124	-	-	-	-	8	285
Engineer and Surveyor	1	-	19	8	-	2	3	-	-	-	8	-	1	41
Fire and Ambulance	-	-	1	4	-	2	-	-	-	-	-	-	-	7
Health	-	1	-	9	-	-	-	-	-	-	-	-	-	10
Housing	1	-	12	1	-	1	-	-	-	-	-	-	3	19
Libraries	-	-	1	2	-	-	-	-	-	-	-	-	1	4
Other Authorities	-	-	-	4	-	-	-	-	-	-	-	-	-	4
Parks and Cemeteries	-	1	22	16	-	7	-	-	-	-	-	-	5	59
Probation Service	-	-	-	1	-	-	-	-	-	-	-	-	-	1
Town Clerk	-	1	-	20	-	-	-	-	-	-	-	-	-	21
Transport	2	1	31	52	283	8	-	-	45	-	-	1	21	475
Treasurer	-	-	-	8	-	-	-	-	-	-	-	-	-	8
Welfare	-	-	26	13	1	9	-	-	-	-	-	-	-	55
Weights and Measures	-	-	-	1	-	1	-	-	-	-	-	-	-	3
Works	-	1	18	7	-	5	-	-	-	-	-	-	6	46
TOTALS:	5	8	291	203	284	54	18	124	45	-	8	1	51	1158



NATIONAL ASSISTANCE ACT, 1948.

Duties under this Act have been assigned to the Welfare Committee of the Council.

There is the utmost co-operation between the staffs, and useful information about handicapped persons or the aged and infirm is exchanged between Welfare Officers and the various Officers of the Health Department.

During the year, no case was required to be dealt with under Section 47 of the Act. Several cases were visited and elderly people living in depressing circumstances were persuaded to have assistance. Some of the homes in which the aged and handicapped were living had become full of rubbish and dirt, and these unhygienic situations were cleaned up as a result of team effort. To clean out several lorry loads of filth and rubbish is no easy task, but the staff of the various departments who have carried out the work are to be congratulated on their persistence. What is heartening is that for several elderly it has resulted in a new and comfortable life in a Local Authority Welfare Home or other new surroundings.

WORK DONE ON BEHALF OF THE CHILDREN'S COMMITTEE

Throughout the year the routine medical supervision of children in the care of the Local Authority has been carried out by Medical Officers of the Health Department. Examinations were carried out at the larger group homes and in foster homes, as laid down by the Home Office Boarding-Out Regulations.

CO-ORDINATING COMMITTEE - PROBLEM FAMILIES

At intervals in 1969, meetings were held to co-ordinate the work of the various departments of the Corporation dealing with these families in trouble.

NURSING HOMES

There are two Registered Nursing Homes in the town and during 1969 we received one additional application for registration which has so far not been granted. The trouble is that the new regulations regarding fire precautions impose severe standards and adaptations of older houses are very expensive. Difficulty is experienced by owners of Nursing Homes in finding money to bring them up to regulation standard. This inevitably results in higher fees for the old and sick people.

The care of the aged is an ever increasing problem. It is easy to introduce severe regulations, but if the high costs close the nursing homes where will the elderly people live in their declining years? It must be remembered that if an elderly person can afford to go into a private home, this leaves one more place in the Local Authority home for a senior citizen who is in poorer financial circumstances.

CREMATIONS

The Medical Officer of Health is Medical Referee to the Landican Crematorium; the Senior Medical Officer and one other Medical Officer in the Department have been Deputy Referees during 1969.

1966	...	2,160
1967	...	2,176
1968	...	2,307
1969	...	2,464

As will be seen from the annual figures, the number of cremations continues to rise. The Landican Crematorium serves not only Birkenhead but the area around :-

Birkenhead	...	756
Wallasey	...	710
Bebington	...	348
Hoylake	...	259
Neston	...	92
Heswall	...	183
Wrexham	...	8
Chester	...	43
Other Areas	...	65
		<hr/>
		2,464

RE-HOUSING ON MEDICAL GROUNDS

During the year 1969, 315 medical certificates were referred for consideration and, as a result, 91 applicants were re-housed on the recommendation of the Medical Officer of Health. There were many acute problems, e.g., elderly people suffering from chest and heart diseases, grossly handicapped, both young and old, and all needing accommodation suitable to their needs. Some needed considerable assistance in the way of adaptations to property, and this help was given through the Welfare Department, thus enabling handicapped people to manage more adequately in their own homes.

The re-housing of handicapped people, because of difficulties caused by the building of the fly-overs and the Tunnel approach scheme, has been mentioned elsewhere.

Another interesting case concerned a lady who had been blind for many years. She gave up her home to live in an institute for the blind. After an operation, her sight was partially restored and following a medical recommendation for re-housing she now lives in the community in her own home.

It was possible to effect transfers in many cases where parents caring for handicapped children were living in unsuitable situations. Tenants living in multi-storey flats often suffer from severe mental stress, particularly mothers who have several young children who have little space for play. Isolation from one's old friends in the Clearance Areas adds to this stress.

Re-housing has been recommended for district nursing patients suffering from incurable disease where such people are living in very poor conditions without modern amenities. Similarly, patients who have undergone severe surgery need more hygienic living conditions and bathroom facilities. The handicapped child needs closed play space or a garden, and re-housing has been recommended for this reason.

All these cases have involved much detailed work.

During the year a category system was introduced :-

- \*\*\* maximum priority
- \*\* can wait a few months
- \* a little medical priority

The \*\*\* are usually people with multiple diseases or grossly handicapped - particularly the frail elderly. The trouble has been that there is insufficient ground floor and bungalow accommodation for them all. We have too many three-bedroomed houses, though more one and two-bedroomed properties are under construction.

The \*\* priority cases are often people with chronic chest disease - the scourge of industrial Merseyside. These people need re-housing in the smoke free areas and this cuts down the choice of housing. Where suitable property has been available, the Assistant Director of Housing has done his best to help. Sometimes our efforts have been of no avail as a person with medical priority in the North end has refused an offer in the South end and vice versa.

Those with \* priority are those with less urgent need but when the opportunity arises such cases are re-housed.

The cases were referred to us from Consultants, Family Doctors, Health Visitors, District Nurses, Social Workers and Public Health Inspectors. Each case has been carefully assessed and it is hoped that choice of priority has been fair. One thing is certain, the close liaison shown between the staffs of the Housing and Health Departments must continue in future years if help is to be given to medical cases that need the most assistance.







# THE HEALTH OF BIRKENHEAD

1969



COUNTY BOROUGH OF BIRKENHEAD



EDUCATION COMMITTEE

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ANNUAL REPORT  
on the  
**SCHOOL HEALTH SERVICE**  
for the  
YEAR ENDED 31st DECEMBER, 1969  
by

P.O. NICHOLAS

M.B., Ch.B., D.C.H., D.P.H.

Principal School Medical Officer

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COUNTY BOROUGH OF BIRKENHEAD

EDUCATION COMMITTEE  
(as at 31st December, 1969)

The Worshipful The Mayor  
COUNCILLOR G. WILLIAM GILL, J.P.

Chairman:

ALDERMAN G.F. DAVIES, J.P.

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PROFESSOR E.G. WHITE,  
Ph.D., D.Sc., F.R.C.V.S.

E.G. WILLIAMS

S T A F F

Principal School Medical Officer:  
P.O. NICHOLAS, M.B., Ch.B., D.C.H., D.P.H.

Deputy Principal School Medical Officer:  
A.H. WILDE, M.B., Ch.B., D.P.H.  
(Resigned 28th February, 1969)

Senior Medical Officer:  
MARY P. HARAN, M.B., B.Ch., B.A.O., D.P.H.  
(Commenced 18th August, 1969)

School Medical Officers:  
PAMELA P. GRIFFITH, L.R.C.P., L.R.C.S., L.R.F.P.S.

Local Medical Practitioners who provide part-time  
services on a sessional basis:

OLIVIA S. CROSTHWAITE, M.B., Ch.B.  
JOYCE M. OWEN, M.B., Ch.B.  
PAMELA A. ROBERTON, M.B., Ch.B., D.Obst., R.C.O.G.  
MAUREEN M. WETHERELL, M.B., Ch.B.  
ISAAC LIPSEGE, M.B., Ch.B.  
WINIFRED M. EVANS, M.R.C.S., L.R.C.P., D.P.H.  
SHIRLEY NICHOLAS, M.B., Ch.B., D.Obst., R.C.O.G.  
DEREK HAYDN WILLIAMS, M.R.C.S., L.R.C.P., M.B., B.S.  
(Ceased 24th October, 1969)

Chief Dental Officer:  
W.M. SHAW, L.D.S.

Senior Dental Officers:  
R. CLIFFE, B.D.S.  
S. MYSOREKAR, B.D.S. (Commenced 3rd March, 1969)

Local Dental Officer who provides part-time  
service on a sessional basis:

N. HEWITT, L.D.S.

Consultant Orthodontist (Part-time):  
T. WYNNE, Ph.D., B.D.S., F.D.S., D.Orth. R.C.S.

Anaesthetist (Part-time):  
A. BUSHBY, M.B., Ch.B., M.R.C.S., L.R.C.P., D.A.

Speech Therapists:  
Mrs. C. WILSON, L.C.S.T.  
Mrs. R.S. LAW, L.C.S.T. (Part-time)  
Mrs. E. THOMAS, L.C.S.T. (Part-time, commenced 21st April, 1969)

Superintendent Health Visitor and School Nurse:  
Miss A.E. GRIFFITHS, S.R.N., S.C.M., H.V.C.

Health Department,  
Social Services Centre,  
BIRKENHEAD.

TO: THE CHAIRMAN AND MEMBERS  
OF THE EDUCATION COMMITTEE

My predecessor, Dr. J.W. Lobban, retired on 10th January, 1969. I was grateful for the week of briefing that I received before his retirement. Dr. A.H. Wilde, Deputy Medical Officer of Health and Deputy Principal School Medical Officer, remained to help for the first two months of the year before moving to his new post in Shropshire and thus only one full-time Medical Officer, Dr. P.P. Griffith, was left to run the School Health Service. Fortunately, there were eight part-time Doctors to carry out much of the school medical examination work - without their help we could not have performed all the duties mentioned in this report.

In August, 1969, Dr. Haran, the Senior Medical Officer, joined the staff and she has developed the services for handicapped children. In this work she has joined Mr. J.M. Dunning, the Assistant Director of Education, responsible for the education of handicapped children. In the Education Sub-Committees the Director of Education and I have re-emphasised the needs of the handicapped children in Birkenhead.

In 1969 a new school for educationally subnormal children, Woodvale, was opened. This has been the first of many steps to provide improved schooling for the handicapped.

There has been a new emphasis on the ascertainment of deaf and hard of hearing children. The Education Department have appointed a Peripatetic Teacher for Partially Hearing Children and a Partially Hearing Unit is under construction attached to Townfield School.

The Director of Education had in the previous year opened progress classes to assess the potential of young 5 to 8 year olds with educational difficulties.

There is a commitment to open a school child guidance service and by the end of the year it had been agreed by the Education Committee that a full-time additional Educational Psychologist and Social Worker plus additional remedial teachers for the maladjusted should be appointed. We have received good help from the child guidance team at the Birkenhead Children's Hospital and from the Child Guidance Clinic at Notre Dame Clinic in Liverpool. If we can establish this school child guidance service in addition, more maladjusted children who need help will receive it. The problem is that there is a shortage of child psychiatrists - though by the end of the year we had a promise of a psychiatrist for one session.

The needs of the physically handicapped children must not be forgotten. Birkenhead has a greater number of children suffering from spina bifida than the national average figure. Though with improved obstetrics the number of severely crippled spastic children has fallen, with improved operative technique spina bifida children now live, but many are crippled and need special care. A site is earmarked on the Woodchurch Estate to build a 100 place school for physically handicapped children. It is hoped that money will be available in the coming year. Then the children of Birkenhead will not have to rely so heavily on school services for the physically handicapped at Clatterbridge Hospital and at Ellera Park School in Wallasey.

The various officers, doctors, nurses and educationalists have tried to link with the paediatric and child psychiatric consultants at the hospitals to provide a co-ordinated service for the handicapped - our case conferences have been a real help to understanding the problems of each handicapped child and to try to give the most suitable education. Where education proves too difficult hope still remains at the Junior Training Centre at Hale Road in Wallasey. Shortly, these children are to be moved into new, purpose built, premises at Moreton. This new Junior Training Centre is a joint project built by the Birkenhead and Wallasey Corporations. There is to be a special care unit of some twenty places to provide for the multiple handicapped severely mentally retarded children. It may be we cannot train all these children but we can bring relief to many a harassed mother at home.

In this introduction I have concentrated on the work for handicapped children which we hope has reached a new impetus in 1969. As this report shows, we have not neglected the other aspects of school health work. I express my grateful thanks to Mr. C.G.D. Taylor for his administrative guidance of the school health section of the Department - the compilation of this School Health Report is largely his achievement.

To the Director of Education and his staff I offer my thanks for their kindness and co-operation. The head teachers and teachers at the schools have been most helpful. I know they appreciate the value of health education in the life of future generations. The Chairman, Alderman G.F. Davies, and the Committee Members have demonstrated throughout the year their concern in all matters we have brought to their attention. With the efforts of all I do not think the 23,000 school children of Birkenhead could have been better served.

P.O. NICHOLAS,  
PRINCIPAL SCHOOL MEDICAL OFFICER.



COUNTY BOROUGH OF BIRKENHEAD(Number of Schools and Children)Primary Schools

County .. .. .	37
Voluntary .. .. .	22
Number of children on the rolls .. .. .	15,883
Average attendance .. .. .	14,516

Secondary Schools (Maintained)

County .. .. .	15
Voluntary .. .. .	5
Number of children on the rolls .. .. .	8,339
Average attendance .. .. .	7,316

Secondary Schools (Non-maintained)

There are four direct grant Secondary Schools in the Town as follows :-

The Birkenhead School for Boys, Shrewsbury Road.  
 The Birkenhead High School for Girls, (G.P.D.S.T.)  
 Devonshire Place.  
 The Convent, F.C.J., High School, Holt Hill.  
 St. Anselm's College, Manor Hill.

Nursery Classes

Nursery Classes exist in connection with the Infants' Departments of the following schools :-

Cathcart Street Primary  
 Rock Ferry Primary  
 The Dell Primary  
 Bedford Drive Primary

Progress Classes

Progress Classes are maintained at Pilgrim Street, The Woodlands and at Trinity Street Primary Schools.

Special Schools and Education in Hospitals

Educational facilities are provided as follows :-

Woodvale School	-	Day Special School for E.S.N. Pupils.
Thingwall Hospital	-	Special School.
St. Catherine's Hospital	-	2 Full-time Teachers assisted by 3 Part-time Teachers.
Children's Hospital	-	2 Teachers holding permanent appointments assisted by one Part-time Teacher.

MEDICAL INSPECTION AND TREATMENT

The arrangements for the reference of children found to require treatment at routine, special and selective medical inspections have continued as in previous years.

The flow of information about school children from the medical staffs of Hospitals on Merseyside, particularly of Children's Hospitals, has continued. Much useful information has been sent to the School Health Service.

Medical histories of school leavers have continued to be sent to the General Practitioner, when considered desirable.

Medical inspections are held as follows :-

- (a) Every pupil admitted to maintained Primary School, as soon as possible after date of admission.
- (b) Selective medical inspection of pupils carried out in Primary Schools at age of 7-8 years and at 11 years.
- (c) Every pupil attending maintained Secondary School during the last year of attendance at school.

The following additional examinations were carried out :-

Children referred for convalescence	..	..	13
Employment out of school hours	..	..	95
Annual medical examination of boarded-out children	..	..	98
Audiometry - Sweep Tests in school	..	..	4,250
Clinic examinations	..	..	604
Other minor examinations	..	..	53

The selective medical inspection is arranged from children known to have defects (Entrants), any suggested by the Director of Education, Headteachers and at the request of parents.

276 re-inspections were made in the case of children with defects necessitating a "follow-up".

CO-OPERATION WITH PARENTS

Parents attended at the examination of 3,479 (66.17%) of the 5,261 pupils seen at medical inspections.

Age Group Inspected (By year of birth)	Number of pupils inspected	Number of parents present	%
1965 (and later)	481	449	93.12
1964	1,469	1,382	93.41
1963	382	314	82.20
1962	195	151	77.44
1961	112	81	72.32
1960	127	90	70.87
1959	81	49	60.49
1958	478	372	77.82
1957	219	151	68.95
1956	8	6	75.00
1955	1	-	-
1954 (and earlier)	1,708	434	25.41

It is always encouraging that so many parents take an interest and attend the medical examination, particularly in the early stages of their child's school life.

NUTRITION

Of the 5,261 children medically inspected it will be seen from the statistical table 1, section D (see returns to the Department of Education and Science) that 5,243 children or 99.66 per cent were satisfactory and 18 or 00.34 per cent were classified as unsatisfactory.

There can be no doubt that the carefully chosen school meals and the provision of school milk maintain the general condition of school children at a satisfactory level.

PROVISION OF MEALS AND MILK

The total number of school meals provided during 1969 was 2,779,554, an increase of 97,602 on 1968. Of this number 2,162,647 were supplied on payment and 616,907 were provided free. The figures include meals to Teaching Staff, supplied at the appropriate rate. During the year 2,895,336 third pints of milk were supplied. Figures in respect of meals refer only to main-maintained schools and include those supplied to Teachers but not to those for members of kitchen and canteen staff. The supply of meals during school holiday periods is now confined to the mid-summer only. The figures relating to the supply of milk include non-maintained schools in the Borough and represent the first full year's return, following the withdrawal of free milk under the scheme, to pupils of Secondary School age.

### CLEANLINESS AND CLOTHING

474 pupils of the 50,435 examined were found to be infested with vermin in varying degrees. In many instances re-infection occurred after cleansing. Housing conditions cannot be wholly to blame and constant vigilance is necessary to combat this social evil. However, there are still many homes without adequate bathing facilities and to combat this deficiency the Local Authority has agreed over the next year to complete a Cleansing and Bathing Centre at Balls Road Clinic, and also to consider the appointment of a state enrolled nurse to assist in helping and instructing mothers in how to cleanse verminous children and also those with head infestation. It is the hard core of problem cases and those with head infestation who infect many clean children. It is particularly necessary to get into school in the down town areas straight after the school holidays as over the holiday period with inadequate home care the problem children may have become infected with head lice.

At present highly trained Health Visitors are spending too much time on this cleansing work and in the years to come we must appoint more state enrolled Nurses for this task.

The standard of clothing and footwear was generally satisfactory.

### VACCINATION AGAINST SMALLPOX

During the past year 235 children of school age were vaccinated and 44 re-vaccinated against smallpox.

### B.C.G. VACCINATION AGAINST TUBERCULOSIS

Arrangements were again made during the year to vaccinate 12 year old children in school, subject to the usual consent being obtained from parents.

Children found to be positive following testing are sent for X-ray examination at the Mass Radiography Unit and certain cases are referred to the Consultant Chest Physician.

12 year olds  Parents Notified	MULTIPLE PUNCTURE TEST		VACCINATION
	Children Tested	Positive Reaction	Children given B.C.G.
3,278	2,573	293	2,280

### IMMUNISATION AGAINST DIPHTHERIA

The following are details of immunisation against Diphtheria of school children, carried out in schools :-

Treatment completed	.. ..	434
Received reinforcing injection	.. ..	1,258



### IMMUNISATION AGAINST TETANUS

During 1969 immunisation against tetanus was continued with sessions held in schools and in Clinics. The following number of children were immunised :-

Received a complete course .. ..	444
Received a reinforcing injection .. ..	1,273

### IMMUNISATION AGAINST POLIOMYELITIS

In 1969 immunisation against poliomyelitis continued and the following number of school children were immunised :-

Primary course .. ..	231
Received reinforcing dose .. ..	1,236

### MINOR AILMENTS

Children referred by the Director of Education and Headteachers are medically examined at special sessions arranged for this purpose and these arrangements are proving adequate.

### DEFECTIVE VISION

Dr. Nora English, an approved Ophthalmic Medical Practitioner, has continued to review children with defective vision, referred from school medical inspections. At the present time a weekly session is held at the Eye Clinic, Social Services Centre, Birkenhead, and an additional session has continued each alternative Monday morning to deal with a back-log of cases.

I am grateful for the information about school children with defective vision referred to Dr. English by General Practitioners. I receive a copy of all reports which are sent to the Family Doctors, following such examinations.

Particulars of school children seen at the Eye Clinic during the past year are given below :-

	New Cases	Re-Examinations	Total
Glasses prescribed	112	229	341
Glasses not prescribed	90	155	245
Number examined	202	384	586

During the year a total of 1,042 appointments were despatched and of this number 456 children failed to attend the Clinic for vision testing.

The clinical facilities for eye examination are greatly improved in the new Social Services Centre - there is an excellent dark room and first class equipment. It seems that as a result of these improved facilities the number of those defaulting from attendance at the eye clinic over the last three months of the year has fallen.

### KEYSTONE VISION SCREENERS

The two Keystone Vision Screeners have been in constant use during the past year. Both machines have been used in vision screening of school children aged 6, 8, 10, 12 and 14 years.

Details of the children examined are given below :-

Number of children tested	..	..	..	9,612
Number with defects of varying degree	..			2,710
Number with normal vision	..	..	..	6,217
Number already wearing glasses	..	..		685

The number of schools visited during the year was 44 and 268 sessions were devoted to the screening examinations.

### KEYSTONE SCHOOL VISION SCREENERS

The first Keystone Vision Screener was purchased in May, 1965, when a programme was devised for the screening of particular age groups of pupils in attendance at maintained schools in the Borough. These age groups were 6, 8 and 10 year old pupils.

This pilot scheme proved so successful that a further Vision Screener was purchased in May, 1967, when the scope was increased and now embraces the age range 6 years to 14 years.

There is an adequate test of visual acuity, a check of muscle balance, a fairly good test of colour vision and an assessment of near and distant visual defects.

Children discovered to have visual defects are given the opportunity of seeing their own Ophthalmic Medical Practitioner or Optician of their choice or being seen at the Local Authority Eye Clinic.

The advantage in the use of these machines as compared with previous method of vision testing has been proved without doubt, particularly when testing the younger pupils, who regard the screener as an instrument of technical interest and have no fear when being tested. In addition, the use of the screeners has standardised the technique of vision testing throughout the schools in the Borough.

### PHYSICALLY HANDICAPPED PUPILS

During the year six physically handicapped pupils were newly assessed as needing special educational treatment and cases previously registered were reviewed.

As far as possible, pupils with mild physical handicaps are accommodated in ordinary schools.

### MALADJUSTED CHILDREN

During 1969 a total of 64 children, considered to be maladjusted, were examined by School Medical Officers and referred for investigation by Consultant Psychiatrists.

Normally cases are referred to the Consultant Psychiatrist at the Children's Hospital, Birkenhead, but due to the long waiting list, it has been the practise in the past few years to refer some cases to the Notre Dame Child Guidance Clinic in Liverpool, and during the year 33 cases were referred.

I am most grateful for the comprehensive reports which I receive upon children seen by the Consultant Psychiatrists.

### EDUCATIONALLY SUB-NORMAL CHILDREN

The approved School Medical Officers made recommendations as follows in respect of children thought to be educationally sub-normal :-

Total number of children examined	..	..	..	44
(i) Attendance at Day Special School	..	..	..	20
(ii) Admission to Boarding Special School	..	..	..	3
(iii) To remain at ordinary school	..	..	..	21

Pupils in attendance at the Day Special School for Educationally Sub-normal pupils were kept under review and re-ascertained in connection with special school leaving and at routine re-inspections.

### BLIND AND PARTIALLY SIGHTED PUPILS

The number of Blind and Partially Sighted pupils is very small and these children are accommodated in other Authorities' special schools or local ordinary schools as appropriate.

During the past year one Blind pupil was ascertained as requiring special educational treatment and two partially-sighted children were registered as handicapped pupils.

### DEAF AND PARTIALLY HEARING PUPILS

During the year much work has been done in the ascertainment of children with hearing difficulties. Meetings have been held with all those concerned in this work; with Mr. Barry Dunn, Consultant E.N.T. Surgeon, Mr. H.N. Fletcher, Peripatetic Teacher for the Deaf and Partially Hearing, and the Nurses carrying out the audiometric sweep testing in the school, also with the school Doctors.

All children with more than 20 decibels of loss in one or both ears on testing with a pure tone audiometer have come under careful scrutiny. Accurate testing is not always easy under noisy school conditions and sweep testing can at times cause fatigue and boredom in the Nurses carrying out the task, but in the main we are finding the children who are troubled with hearing loss. Many of these are re-checked in quieter conditions at the Clinic and those where the hearing loss of 20 decibels seems to be sustained are referred to school Doctors and possibly to the Consultant E.N.T. Surgeon. The School Health Service has been well served by the Consultant E.N.T. Surgeons during 1969 - we must continue this liaison in the years to come.

Of course, the work of the Peripatetic Teacher of the Deaf and Partially Hearing goes into the wider aspects of the education of deaf and partially hearing children. Advice is given to teachers on the teaching of these children and parent guidance for continuation of this training of the partially hearing and deaf in the home situation. It seems obvious to state that a hearing aid is useless if it does not work or if the child refuses to use it, but often this is just the problem holding back the child's progress.

We are now offering an improved service to this group of handicapped children, a service which will improve further with the opening of the Partially Hearing Unit at Townfield School in 1970.

Two audiometers for sweep testing of school children have continued to be used in schools and clinics.

The following number of children were seen during 1969 :-

Total number examined	.. .. .	4,250
Number referred for Specialist opinion	..	168

### SPEECH THERAPY

The Speech Therapy Service continues to run as a joint arrangement with the Birkenhead Hospital Management Committee and is working satisfactorily.

I am grateful for the following report from Mrs. C. Wilson, Speech Therapist.

#### "Children Receiving Speech Therapy, 1969

	<u>1968</u>	<u>1969</u>
Receiving Speech Therapy	352	322
Completed Course of Therapy	46	59
Awaiting Review	43	49
Removed from List	59	19
Under Review	-	47



These figures confirm:

- (a) The benefits (shown in the reduced number of children removed from the list for non-attendance) of a more thorough follow-up system;
  - (b) The encouraging increase in co-operation from both parents and school staff seen in the greater proportion (18% vs. 13% in 1968) of children who completed a course of therapy.
- 

During 1968 there were 1 full-time and 1 part-time therapists working in Birkenhead at mid-year, and 2 full-time and 1 part-time therapists in December; while in 1969 there were for the major part of the year 1 part-time and 2 part-time therapists working in the school clinics. Thus the facilities Birkenhead can offer have just been able to keep pace with demand.

#### Age of Referral

There are three distinct stages at which children tend to be referred to the Speech Clinics:

- (a) Pre-school (under 5 years)
- (b) Primary School (especially in the Infant Departments, 5-8 years)
- (c) Secondary School (11-12 years)

The most significant trend during the past year has been the increase in the number of pre-school children referred to the clinics. Before the age of 5 years, most children are too young to benefit from direct therapy in clinics, but much work can be done through the parents. Generally speaking, the younger the child when first seen the greater the chance of a quick, successful cure. With the latter two groups the child is usually referred for therapy at a time when it moves into a new environment and difficulties in communication are found. These difficulties are usually noted by the class teacher or visiting School Medical Officer.

#### Speech Therapy

Parents of the young child are often surprised that their children have been referred for treatment as they themselves find they have no difficulty in understanding them. It is, therefore, very important that whoever refers a child for treatment should inform the parents and state their reason for doing so. This would lessen the feelings of fear and hostility sometimes encountered by the therapist in the children and their parents when they visit the clinic for the first time.

### Types of Disorders

- (a) Articulatory disorders, e.g. distortion, substitution or omission of speech sounds.
- (b) Disorders of language, e.g. disturbance or delay in the development of grammar, syntax, etc.
- (c) Disorders of rhythm, e.g. stammering.
- (d) Voice disorders, e.g. disturbance in the tone of the voice, such as nasality or hoarseness.

In some cases a combination of these disorders were found in one and the same child. Causes varied from the purely emotional, intellectual or physical, to a combination of several - none of them particularly significant in itself but together giving rise to a moderate speech defect. In Birkenhead the majority of children seen had difficulties with articulation, in many cases with associated reading and spelling difficulties and disorders of language. Stammering (stuttering) was also prevalent.

Most of the children referred to the Speech Clinics were sent by either the school teacher or the visiting School Medical Officer. Parents sometimes asked for their children to be referred to the Principal School Medical Officer through the Health Visitors. Pre-school children were usually admitted in this way.

### Clinics

During 1969 two important developments in the siting of the Speech Therapy Clinics took place. In October the main clinic moved from 12 Hamilton Square to the new Social Services building in Cleveland Street, and in November, 1969, a new Speech Clinic was opened at the Prenton Clinic for two sessions per week. The Prenton Clinic has proved popular with patients from the Woodchurch and Prenton Estates and the siting of the main clinic in the Social Services Centre has made communications within the Health Service much easier.

### Clinic Attendance

Parental co-operation appears to have improved and more regular attendance has been noted during 1969 as the result of an explanatory letter giving the reasons for the child's referral and the nature of the treatment in clinic, which has been circulated initially to all parents whose children have been referred to the Speech Clinic. Great co-operation has also been received from the Health Visitors, Education Welfare Officers and Teachers in ensuring a child's regular appearance. Such co-operation from all Departments of the Health Service and Education Department has been extremely encouraging. Further opportunities for a deeper understanding of Speech Therapy by members of other professions were provided during 1969. Two talks on Speech Development in Children and Associated Disorders were organised for the benefit of teachers and play-group leaders in Birkenhead.

## Future Developments

### (a) Maintaining the number of Therapists

It is difficult to keep speech therapists and even with our full quota of therapists (2 full-time) we are not keeping pace with the demand for speech therapy. The industrial North is not attractive to speech therapists and it may be necessary to consider a senior post, both to hold staff, and to guide the work in school clinics and hospitals.

### (b) Increase in the scope of the work

The limited number of therapists and the tremendous demand for work in clinics have meant that important activities vital to successful treatment, e.g. school and home visits, have had to be ignored. Teachers appear very willing to help the children with their speech problems, but they obviously need guidance on how best to do this, which at present we are unfortunately unable to give. In some schools where there have been a considerable number of children referred for treatment it might be more profitable to hold a treatment clinic in the school itself, while assessment and parent counselling would take place at the main clinic. In this way close contact could be kept with the teachers, the problems that some parents have in bringing their children regularly would be overcome, and the child might respond to treatment better in familiar surroundings.

### (c) Clinic Facilities

As more and more is known about speech defects and their treatment so the technique of assessment and treatment become more refined - requiring more specialised equipment and facilities. Even the room for speech therapy at the new Cleveland Street Centre was designed several years ago, and in the years to come we may need to provide the further accommodation of a sound proof room and possibly more spacious accommodation for group work - a possibility is to use the Conference Room in the new Centre. In many cases it is helpful for the parent to observe the treatment unobtrusively and thus encourage help from the home.

We must think of all these needs of the Speech Therapy Service in the future."

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EAR, NOSE AND THROAT

Pupils found at routine, special and re-inspections to be suffering from pathological conditions requiring treatment are referred to their General Practitioners or to the Consultant E.N.T. Surgeons as deemed necessary.

From returns submitted by Birkenhead Hospitals, the following treatment was reported to have been given during 1969 :-

Hospital	For adenoids and chronic tonsillitis	For other nose and throat conditions
St. Catherine's	32	6
Children's	56	41

CONVALESCENCE AND AFTER CARE

In 1969 the Medical staff examined 15 children who were referred for convalescence and approval was given in all but one case :-

Cases referred by :-

Director of Education	..	..	2
School Medical Officers	..	..	13

Parents refused consent in one case and the actual number of children admitted to Convalescent Homes during the year was 13. One child was removed by parents from a Convalescent Home after only two days treatment and two children were granted an extension of two weeks treatment.

HEALTH EDUCATION

The three main topics dealt with in schools during the past year have been "Diet and Obesity", "The Accidental Poisoning of Children", and "First Aid for Road Users".

The last two subjects have not been confined to school lecturing but have been the subject of selected lectures to fit into larger schemes which have been designed for the whole Borough of Birkenhead.

As a means of assessing the reactions of pupils to the subject of First Aid being taught as a school subject, a questionnaire was distributed to a random sample of half a dozen schools. Although many questionnaires were not returned, the result of those received showed an overwhelming desire for this to become a school subject.



The schools visited and the subjects dealt with were as follows :-

Grange Secondary	)	
Park High School (Boys)	)	
Park High School (Girls)	)	
Cavendish Secondary	)	
Ladycross R.C. Secondary	)	First Aid
Prenton Secondary (Girls)	)	Accidental Poisoning
Birkenhead Institute	)	Diet and Obesity
Hamilton Secondary	)	Dental Hygiene
Blessed Edward Campion R.C. Secondary	)	Smoking
Woodchurch Secondary (Boys)	)	
Woodchurch Secondary (Girls)	)	
St. Hugh's R.C. Secondary	)	

A new School Health Education Service is envisaged - the main priority in the new scheme is that the Health Education Service should accommodate itself to the requirement of each individual school and supply lectures or advice on request, rather than suggest topics to the schools, as at present.

#### REPORT ON PHYSICAL EDUCATION IN SCHOOLS IN BIRKENHEAD

The Director of Education has kindly submitted the following report :-

The quality of physical education in all the schools of the Borough remains high. The new entrants to the teaching profession are greatly influencing methods of teaching physical education and far more stress is now being placed on the "movement" approach. Most primary schools now have light and easily assembled tubular steel apparatus and a working party is busily engaged in the study of physical education in the developing middle schools. Great zeal is shown in the teaching of swimming and an extremely high percentage of our scholars leave the junior school able to swim.

Out of school activities proceed vigorously. In the primary schools the inter-school leagues and rallies in football, cricket, rounders and netball have been supported with real enthusiasm. The primary school third-year football competition is now firmly established and has proved to be a great success. The primary town team had its most successful season in the county competition for primary teams, being joint winners with Ellesmere Port, of the Moor's Cup. A great deal of thought has gone into the organisation of sport in the new middle schools. This year an attempt to hold the Primary Athletics Festival on a Saturday was successful. A morning start was chosen and this, too, met with approval. Many schools wrote to say how much they had appreciated the arrangements.

The secondary side showed the usual keen interest in a wide variety of activities. The boys' Cross Country was held for the first time in Birkenhead Park and ten schools took part. A number of Birkenhead schools took part in the County Race at Knutsford, and two boys were in the County teams. In athletics Birkenhead

were hosts to the County at the Oval Sports Centre. It is interesting to note that metrication was introduced this year for most of the events. In football the senior town team had a reasonable season reaching the semi-final of the Cheshire Shield Competition. The junior team reached the semi-final of the Alcock Cup being beaten by Stockport. The girls of Birkenhead Secondary Schools fully held their own in every way. A Birkenhead girl was chosen to represent Cheshire in the National Cross Country Championships at Leicester. The Birkenhead Schools' Track and Field Championships were held at the Oval in May. Fourteen schools took part. A full team of girls then went to represent Birkenhead in the Cheshire Schools' Meeting held at the Oval in June. The Birkenhead Schoolboys' and Schoolgirls' Sports Associations were responsible for organising this event, in which nearly 1,000 children took part. Three Birkenhead girls represented Cheshire in an inter-county athletics match at Warley and also in the English Schools Championships at Motspur Park, Surrey. Hockey, tennis, netball, badminton and rounders were also very successfully pursued, and in swimming Birkenhead girls won the Cheshire Schools Galas for the fourth successive year.

None of these valuable activities would be possible without the enthusiastic voluntary support of the teachers. The efforts of the officials of the Birkenhead Schoolboys' and Schoolgirls' Sports Associations deserve special mention.

ANALYSIS OF HOSPITAL TREATMENT (IN-PATIENTS)

From returns of in-patient treatment submitted during the year by Hospitals in the area, the following analysis, shown under 11 groups, gives the number of cases treated.

Localisation of Disease	Children's Hospital	St. Catharines Hospital	Thingwall Hospital	Totals
(1) EYES:				
Operative	-	-	-	-
Non-operative	-	-	-	-
(2) SKIN	-	-	-	-
(3) GENITO-URINARY	2	50	9	61
(4) EARS:				
Operative	2	-	-	2
Non-operative	12	-	1	13
(5) NOSE & THROAT:				
Tonsils and Adenoids Ops.	56	32	-	88
OTHERS:				
Operations	-	-	-	-
Non-operations	41	6	-	47
(6) HEART & CIRCULATION	2	9	-	11
(7) RESPIRATORY	6	38	25	69
(8) OPERATIVE SURGICAL	13	76	-	89
(9) NERVOUS CONDITIONS	-	-	-	-
(10) ORTHOPAEDIC	54	24	12	90
(11) GENERAL MEDICAL	136	217	32	385
TOTALS	324	452	79	855

HANDICAPPED CHILDREN - SUMMARY OF ACCOMMODATION(as at 22nd January, 1970.)PupilsCategory (a) Blind

Birmingham Royal Institute of the Blind.	1
St. Vincent's School, Liverpool.	1
Sunshine Homes, Southport.	1

Category (b) Partially Sighted

Holmrook School, Liverpool.	1
St. Vincent's School, Liverpool.	1

Category (c) Deaf

Alice Elliott Day School, Liverpool.	11
Bridge House School, Harewood, Yorks.	1
Royal Schools for the Deaf, Manchester.	1
St. John's School for Deaf, Boston Spa.	3
Underlea Day Open Air School, Liverpool.	2
Ellesmere Port Day School.	1

Category (d) Partially Hearing

School for the Partially Hearing, Birkdale.	2
---	---

Category (e) Educationally Sub-Normal

Aldwark Manor, Kingston-upon-Hull.	2
Allerton Priory, Liverpool.	3
Besford Court, Worcester.	1
Camphill Rudolf Steiner School, Aberdeen.	1
Gallowhill, Morpeth.	1
Hindley Hall, Gateshead.	2
Pitt House, Torquay.	3
Rocklands School, Torquay.	1
Pontville School, Ormskirk.	4
St. John's School, Brighton.	2
Spring Hill, Ripon.	1
Woodvale School (Day), Birkenhead.	105

Category (f) Epileptic

Maghull Homes for Epileptics, Maghull.	4
Soss Moss School, Manchester.	1

Category (g) Maladjusted

Bryn Alyn Hostel, Wrexham.	1
Bylands School, Basingstoke.	1
Clwyd Hall, Ruthin.	3
Hilbre School, Sheringham.	1
House in the Sun, Hengrove, St. Leonards.	1
Larches House, Preston.	1
St. Joseph's School, East Finchley.	1
St. George's School, East Grinstead.	2
St. Thomas More's School, South Devon.	3
Shotton Hall, Shrewsbury.	2



PupilsCategory (h) Physically Handicapped

Bethesda Home, Cheadle.	1
Convalescent Home and School, West Kirby.	5
Elleray Park (Day), Wallasey.	17
Margaret Barclay School, Moberley.	1

Category (j) Delicate

Torpenhow Open Air School, Frankby.	2
-------------------------------------	---

RETURN OF HANDICAPPED CHILDREN

PART I

Details of handicapped pupils requiring education at Special Schools, returned to the Department of Education and Science on Form 21M an extract of which is reproduced.

	During the calendar year ended 31st December, 1969:-	Blind (1)	P.S. (2)	Deaf (3)	Pt.Hg. (4)	F.H. (5)	Del. (6)	Mal. (7)	ESN (8)	Epil (9)	Sp.Def. (10)	TOTAL (11)
A	How many handicapped children were newly assessed as needing special educational treatment at special schools or in boarding homes?	1	1	1	1	5		7	12			27
			1		2	1		3	11	2		21
B	How many children were newly placed in special schools (other than hospital special schools) or boarding homes?											
	(i) of those included at A above											
	(ii) of those assessed prior to January, 1969	1		1	2	5		2	1	1		9
	(iii) TOTAL newly placed - Boys	1	1			3		3	8			15
	(iii) TOTAL newly placed - Girls	1		1				5	5			6
	(iii) TOTAL newly placed - Boys	1	1	1	2	8		5	9	1		24
	(iii) TOTAL newly placed - Girls	1				1		2	10			13

## PART III

	As at 22nd January, 1970:-	Blind (1)	P.S. (2)	Deaf (3)	Pt.Hg. (4)	P.H. (5)	Del. (6)	Mal. (7)	ESN (8)	Epil (9)	Sp.Def. (10)	TOTAL (11)
	How many children from the Authority's area were awaiting places in special schools other than hospital special schools?											
(1) Under 5 years of age	(i) waiting before 1st January, 1969:-	-	-	-	-	-	-	-	-	-	-	-
	(a) day places											
	(b) boarding places											
	(ii) newly assessed since 1st January, 1969:-	-	-	-	-	-	-	-	1	-	-	1
(2) Aged 5 years and over	(i) waiting before 1st January, 1969:-											
	(a) whose parents had refused consent to their admission, to a special school	-	-	-	-	-	2	2	11	-	-	13
	(b) others	-	-	-	-	-	-	-	7	-	-	7
	(a) day places								7	-	-	7
	(b) boarding places	-	-	-	-	-	1	6	-	-	1	8
	(ii) newly assessed since 1st January, 1969:-	-	-	-	-	-	-	1	-	-	-	1
	(a) whose parents had refused consent to their admission, to a special school	-	-	-	-	-	-	-	-	-	-	-
	(b) others	-	-	-	-	-	-	-	-	-	-	-
	(a) day places								6	-	-	6
	(b) boarding places	-	1	-	1	-	-	5	2	-	-	8
(3) Total number of children awaiting admission to special schools other than hospital special schools - Total of (1) and (2) above	(a) day places	-	-	-	-	-	-	-	1	-	-	2
	(b) boarding places	-	1	-	1	-	-	-	1	-	-	3
	(a) day places	-	-	-	-	-	2	-	18	-	-	20
	(b) boarding places	-	1	-	1	-	1	11	16	-	-	16
		-	1	-	-	-	-	3	1	-	-	5

## PART III

As at 22nd January, 1970:-

	Blind (1)	P.S. (2)	Deaf (3)	Pt.Hg. (4)	P.H. (5)	Del. (6)	Mal. (7)	ESN (8)	Epil (9)	Sp.Def. (10)	TOTAL (11)
(i) Maintained special schools (other than hospital special schools and special units and classes not forming part of a special school) regardless by what authority they are maintained	Boys	-	7	1	12	-	-	60	-	-	80
	Girls	-	4	2	6	-	-	45	-	-	58
	Boys	-	-	-	-	1	1	4	1	-	7
	Boarding Girls	-	-	-	-	-	-	-	-	-	-
(ii) Non-maintained special schools (other than hospital special schools and special units and classes not forming part of a special school) wherever situated	Boys	-	-	-	-	-	-	-	-	-	-
	Girls	-	-	-	-	-	-	-	-	-	-
	Boys	1	4	1	4	-	-	7	-	-	18
	Boarding Girls	2	1	1	2	-	1	4	4	-	15
(iii) Independent schools under arrangements made by the authority. Totals to agree with the totals on Form 21b(i)	Boys	-	-	-	-	-	-	-	-	-	-
	Girls	-	-	-	-	-	-	-	-	-	-
	Boys	-	-	-	-	-	10	5	-	-	15
	Boarding Girls	-	-	-	-	-	1	-	-	-	1
(iv) Special classes and units not forming part of a special school. Totals to agree with the totals on Form 21a(i)	Boys	-	-	-	-	-	3	-	-	-	3
	Girls	-	-	-	-	-	-	-	-	-	-
	Boys	-	-	-	-	-	-	-	-	-	-
	Girls	-	-	-	-	-	-	-	-	-	-
How many children from the Authority's area were on the registers of:-	Boys	-	-	-	-	-	-	-	-	-	-
	Girls	-	-	-	-	-	-	-	-	-	-
	Boys	-	-	-	-	-	-	-	-	-	-
	Girls	-	-	-	-	-	-	-	-	-	-
How many handicapped pupils (irrespective of the area to which they belong) were being educated under arrangements made by the authority in accordance with Section 56 of the Education Act, 1944. Totals of (i) and (ii) to agree with the totals of Form 21d(i). See notes (g) and (h) on page 4.	Boys	-	-	-	-	-	-	-	-	-	-
	Girls	-	-	-	-	-	-	-	-	-	-
	Boys	-	-	-	-	-	-	-	-	-	-
	Girls	-	-	-	-	-	-	-	-	-	-
Total number of handicapped children requiring places in special schools; receiving education in special schools; independent schools; special classes and units; under Section 56 of the Education Act, 1944; and boarded in Homes.	Boys	1	11	3	16	4	26	95	1	1	160
	Girls	2	3	3	8	-	5	66	4	-	95
	Boys	-	-	-	-	-	-	-	-	-	-
	Girls	-	-	-	-	-	1	-	-	-	1



MEDICAL INSPECTION RETURNS  
YEAR ENDED 31ST DECEMBER 1962

MEDICAL INSPECTION OF PUPILS ATTENDING  
MAINTAINED PRIMARY AND SECONDARY SCHOOLS

PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected (By Year of Birth)	Number of Pupils Inspected	PHYSICAL CONDITION OF PUPILS INSPECTED		Number of Pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		TOTAL individual pupils
		Satisfactory Number	Unsatisfactory Number		For defective vision (excluding squint)	For any other condition recorded at Part II	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1965 & later	481	480	1	-	1	45	46
1964	1469	1464	5	-	15	119	134
1963	382	379	3	-	8	55	63
1962	195	195	-	-	7	36	43
1961	112	112	-	-	8	23	31
1960	127	127	-	-	11	21	33
1959	81	78	3	5	5	27	31
1958	478	474	4	973	67	98	165
1957	219	218	1	466	38	41	79
1956	8	8	-	-	-	1	1
1955	1	1	-	-	-	-	-
1954	1708	1707	1	-	107	109	216
& earlier							
TOTAL	5261	5243	18	1444	267	575	842

Col. (3) total as a percentage  
of Col. (2) total .. .. .

.. 99.66%

Col. (4) total as a percentage  
of Col. (2) total .. .. .

.. 00.34%

P A R T   I ID E F E C T S   F O U N D   B Y   M E D I C A LI N S P E C T I O N S   D U R I N G   T H E   Y E A R   1 9 6 9P E R I O D I C   I N S P E C T I O N S

Defect Code Number	Defect or Disease		PERIODIC INSPECTIONS				Special Inspection s	
			ENTRANTS	LEAVERS	OTHERS	TOTAL		
(1)	(2)							
4	Skin	T	19	27	16	62	19	
		O	45	38	22	105	32	
5	Eyes - a. Vision	T	22	108	87	217	51	
		O	15	42	54	111	35	
	b. Squint	T	37	12	21	70	31	
		O	18	16	7	41	31	
	c. Other	T	4	1	5	10	3	
		O	1	8	2	11	11	
6	Ears - a. Hearing	T	7	6	12	25	12	
		O	16	10	25	51	47	
	b. Otitis Media	T	9	13	10	32	14	
		O	80	35	39	154	57	
	c. Other	T	-	1	3	4	-	
		O	10	7	6	23	13	
7	Nose & Throat	T	20	7	9	36	27	
		O	185	39	41	265	135	
8	Speech	T	8	1	8	17	18	
		O	26	4	12	42	29	
9	Lymphatic Glands	T	-	2	-	2	2	
		O	29	2	3	34	16	
10	Heart	T	6	1	2	9	3	
		O	16	21	7	44	32	
11	Lungs	T	10	1	10	21	7	
		O	48	39	29	116	77	
12	Develop- mental - a. Hernia	T	2	-	-	2	-	
		O	13	-	1	14	2	
	b. Other	T	7	3	4	14	3	
		O	17	12	4	33	18	
	13	Orthopaedic - a. Posture	T	-	1	-	1	1
			O	20	29	8	57	2
b. Feet		T	19	12	10	41	6	
		O	25	38	12	75	27	
c. Other		T	6	12	7	25	7	
		O	9	44	10	63	27	
14	Nervous System - a. Epilepsy	T	1	3	3	7	4	
		O	1	2	6	9	6	
	b. Other	T	-	-	1	1	1	
		O	5	5	9	19	8	

Defect Code Number	Defect or Disease	PERIODIC INSPECTIONS				Special Inspection s
		ENTRANTS	LEAVERS	OTHERS	TOTAL	
(1)	(2)					
15	Psychological -					
	a. Develop- T	1	1	4	6	6
	ment O	17	2	7	26	16
	b. Stabil- T	1	2	4	7	5
	ity O	19	27	43	89	51
16	Abdomen T	2	1	1	4	1
	O	4	6	7	17	11
17	Other T	-	8	3	11	4
	O	15	33	32	80	49

### ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated:
(a) Pupils treated at Clinics or out-patients departments:	90
(b) Pupils treated at school for postural defects:	-
Total:	90

### DISEASES OF THE SKIN (excluding uncleanliness)

	Number of cases known to have been treated:
Ringworm - (a) Scalp:	-
(b) Body:	-
Scabies:	65
Impetigo:	17
Other skin diseases:	34
Total:	116

CHILD GUIDANCE TREATMENT

Pupils treated at Child Guidance Clinics:	Number of cases known to have been treated:
	64 cases referred

SPEECH THERAPY

Pupils treated by Speech Therapists:	Number of cases known to have been treated:
	322

OTHER TREATMENT GIVEN

(a) Pupils with minor ailments (attended Local Authority's Clinic):	Number of cases known to have been treated:
	92
(b) Pupils who received convalescent treatment under School Health Service arrangements:	13
(c) Pupils who received B.C.G. Vaccination:	2280
(d) Other than (a) (b) and (c) above:	
(i) Audiometry (sweep test) in schools: 4250 )	
(ii) Audiometry-clinic tests by School Medical Officers: 604 )	4854
(iii) General Medical and Minor Ailments treated at Local Hospitals:	308
Total (a)-(d) :	7547



SCHOOL DENTAL SERVICE

I am indebted to Mr. W.M. Shaw, Chief Dental Officer, for the following report on the School Dental Service for 1969 :-

During the year, every effort has been made to recruit dental staff. The response to repeated advertisements has, unfortunately, been poor. However, I am pleased to report that Mr. S. Mysorekar was appointed to the post of Senior Dental Officer in March, bringing the dental officer strength up to the whole-time equivalent of 3.3. This figure compares similarly with those of 1967 and 1968, but with less emphasis on part-time dental officers. In 1952, the Ministry of Education advised local authorities that a staff of one school dental officer to 3,000 pupils was a reasonable target at which to aim. When it is considered that in Birkenhead there are nearly 24,000 school children and a school dental officer strength of 3.3, it can be seen that the dental service must be somewhat limited.

The statistical tables show that 3,999 children received a dental inspection at school, representing about 17 per cent of the total school population. However, a further 1,807 children received a dental inspection at the clinics. It was shown that an average of 39 per cent of children offered treatment following inspection at school, elected to receive that treatment through the School Dental Service. 47 per cent elected to receive the treatment through the general dental services. It is gratifying to note that so many children receive regular dental attention from the general dental services and this is always to be encouraged. However, there remains that 14 per cent who fail to indicate at all if they wish to obtain treatment through either service! A larger percentage of the school population would be able to receive regular dental inspections only as the staffing situation improves; for it is imperative that only comprehensive dental treatment of the highest calibre should be offered to children who elect to receive their treatment through the School Dental Service.

This has been a significant year for the progress of the School Dental Service, in that the central dental clinic has been rehoused in the new Social Services Centre which opened in September. It was decided that the Balls Road dental centre should be closed for a trial period in order to encourage the maximum number of patients to attend the new central clinic. However, it was felt that as there may be a continuing need for a dental service in Balls Road, one dental surgery should be retained for future use. The new central dental clinic houses three dental surgeries, laboratory, generous office accommodation etc. The surgeries are fully equipped with the most up-to-date dental equipment, to provide for comprehensive treatment, and it is with pleasure that I can report that the facilities offered here are of the highest order. The dental services provided at the peripheral clinics have been re-organised to some extent in order to make the most effective use of all clinics.

The transition period between moving the dental services from Balls Road to the Social Services Centre at Cleveland Street, proved a difficult time and this disrupted the continuity of the services to some extent. Serious delays in the provision of the

new equipment installed at the Social Services Centre, partly accounted for this and it was not until the end of the year that the new dental centre became fully functional.

Dr. A. Bushby, our Consultant Anaesthetist, and Dr. T. Wynne, our Consultant Orthodontist, have continued to provide their excellent services and I am grateful for their assistance. I would also like to take this opportunity to express my gratitude for the close co-operation I have received from Dr. Nicholas and from the Education Committee.

I am often questioned as to why it should be necessary for a local authority to provide a dental service for school children when dental treatment can be obtained from general dental practitioners within the National Health Service. I feel that this may be an opportune time to consider the function which our service fulfills in local society.

A report of the Chief Medical Officer to the Department of Education and Science in "The Health of the School Child", in 1962 and 1963, defined the aim of the school dental service thus: "The aim of the school dental service is to ensure that, as far as possible, through dental health education and a high standard of dental care, children shall leave school free from dental disease and irregularity, and with an understanding of the importance of good natural teeth, and be zealous in looking after them." Thus the aims of a school dental service embrace more than the provision of dental treatment. The service is concerned with the dental health of the school population as a whole. It involves the provision of educative and preventative measures in addition to curative and restorative treatment. School dental inspections are not only used as a means of assessing the dental needs of a school population but also as a means of propagating dental health and "selling dentistry".

I feel that whatever changes may soon come about as a result of the expected re-organisation of the health services, there will be a continuing need for the priority dental services including a school dental service. In order to achieve the defined aims of a school dental service, I believe that the close co-operation between local education authorities would always be required and it is difficult to see how this could ever be, with the service totally divorced from local authorities. Perhaps then, if changes are forthcoming, a public dental health department of the future may be a means of co-ordinating all the various aspects of dental health, including a means of assessing the dental needs and demands of a local community. I look to the future of the school dental service with interest but with a degree of anxiety.

DENTAL INSPECTIONS AND TREATMENT CARRIED OUTBY THE AUTHORITYDURING THE YEAR ENDED 31ST DECEMBER, 1969.ATTENDANCES AND TREATMENT

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	TOTAL
First visit	994	1014	198	2206
Subsequent visits	1240	1884	543	3667
Total visits	2234	2898	741	5873
Additional courses of treatment commenced	33	54	11	98
Fillings in permanent teeth	598	2554	810	3962
Fillings in deciduous teeth	625	58	-	683
Permanent teeth filled	476	2133	701	3310
Deciduous teeth filled	542	55	-	597
Permanent teeth extracted	160	515	112	787
Deciduous teeth extracted	1589	538	-	2127
General anaesthetics	690	425	48	1163
Emergencies	449	221	26	696

Number of Pupils X-rayed  
 Prophylaxis  
 Teeth otherwise conserved  
 Number of teeth root filled  
 Inlays  
 Crowns  
 Courses of treatment completed

197  
 652  
 68  
 14  
 -  
 4  
 811

ORTHODONTICS

Cases remaining from previous year  
 New cases commenced during year  
 Cases completed during year  
 Cases discontinued during year  
 Number of removable appliances fitted  
 Number of fixed appliances fitted  
 Pupils referred to Hospital Consultant

24  
 43  
 15  
 7  
 62  
 -  
 1

PROSTHETICS

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	TOTAL
Pupils supplied with F.U. or F.L. (first time)	-	-	-	-
Pupils supplied with other dentures (first time)	2	7	13	22
Number of dentures supplied	2	9	18	29

ANAESTHETICS

General Anaesthetics administered by  
Dental Officer

-
---

INSPECTIONS

(a) First inspection at school. No. of pupils	3999
(b) First inspection at clinic. No. of pupils	1807
Number of (a) + (b) found to require treatment	4908
Number of (a) + (b) offered treatment	3879
(c) Pupils re-inspected at school clinic	548
Number of (c) found to require treatment	393

SESSIONS

Sessions devoted to treatment  
Sessions devoted to inspection  
Sessions devoted to Dental Health Education

1230
63
-



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